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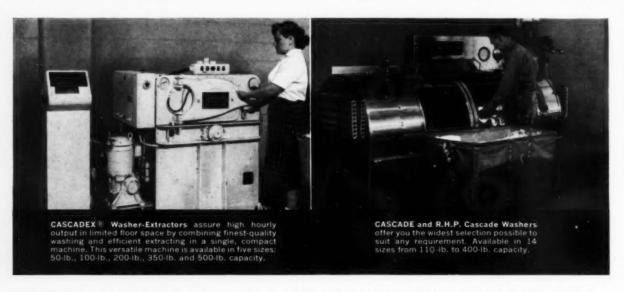
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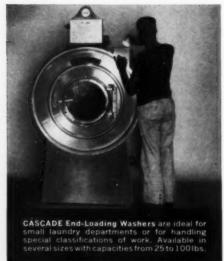
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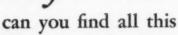
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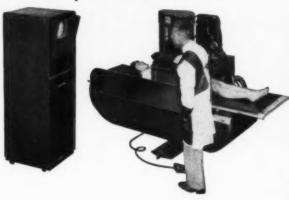
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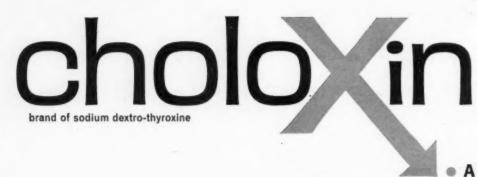


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CCAB

-	Contents October, 1961, Volume 38,	No. 10
	Notes About People	
,	Editorial	43
	A Study in Flexibility — Peterborough Civic James S. Craig	
	Orientation — What's in a Name	50
	Symposium on Purchasing	
	Ethical Conduct H. D. Knox	51
	In Large and Small Hospitals	52
	Scope, Functions, Relationships	54
	Mapping the Work Area A. W. Trimble	55
	Control of C.S.R. Supplies	56
	The Supplier as Consultant	58
	Stores Department Staffing	59
	Is Purchasing a Profession?	60
,	Total Patient Care — Peterborough Civic	62
	Dietary Service in Manitoba Isabel MacArthur	66
,	A.C.H.A. Convocation	70
	Paper Dining Service	
	Maritime Conference Meeting Sr. Mary Brenda	80
1	Radiological Technicians Meet	82
	Recent Federal Grants	
	Vith the Auxiliaries	
	Radiological Services in B.C. R. H. Thompson	96
	Books Received	98
	New Products and Equipment	
	Coming Events	
-	Twenty Years Ago	168
-	Classified Advertising	178
	ndex of Advertisers	

Cover Picture—The C.S.R. work room at the Peterborough Civic Hospital, Peterborough, Ont.

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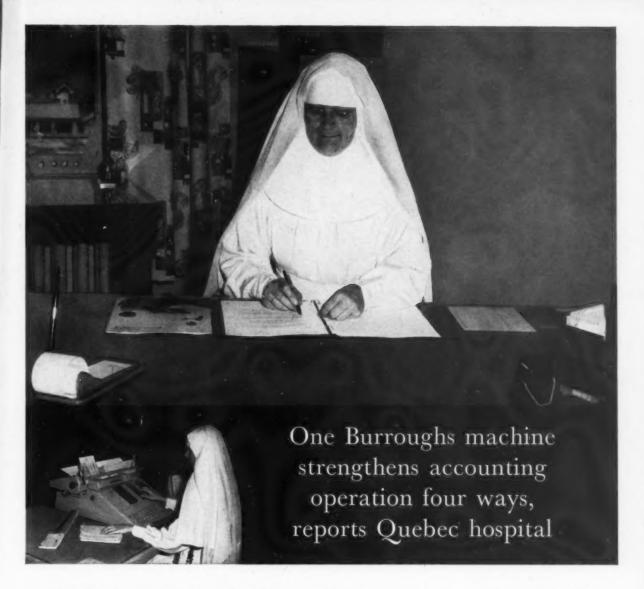
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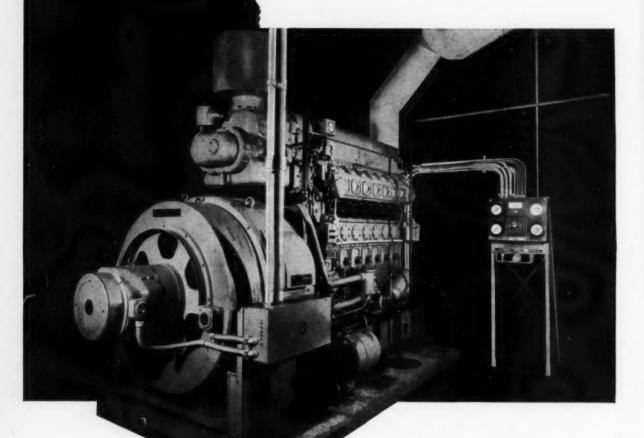


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SUTURES

notes about people

Personnel Changes in Hospitals, Sisters of St. Martha

The former administrator of St. Martha's Hospital, Antigonish, N.S., Rev. Mother Paul of the Cross, is the new superior general of the Sisters of St. Martha. Mother Paul of the Cross has been administrator for many years and is a



Rev. Mother Paul of the Cross.

fellow of the American College of Hospital Administrators. She succeeds Mother M. Ignatius, well known in the hospital field, who held the office of superior general for thirty years and who was the recipient of the George Findlay Stephens Award in 1956.

The new administrator at St. Martha's Hospital, succeeding Mother Paul of the Cross, is Sister Maria Loyola, the former assistant administrator at the hospital. Sister Maria Loyola is a 1959 graduate of the University of Toronto course in hospital administration. Sister Mary Aneas, for many years on the staff of St. Joseph's Hospital, Glace Bay, is the new superior and administrator of St. Rita Hospital, Sydney, N.S., succeeding Sister M. Clarissa, who is now treasurer-general of the Congregation.

Sister Mary of Calvary, who this year completed the C.H.A. course in hospital organization and management and who has been the superior of St. Martha's Hospital, is the new vicar-general for the Sisters.



Sister M. Clarissa.

Other changes in the hospitals of the Sisters of St. Martha include Sister M. Consulata, administrator of St. Michael's Hospital, Lethbridge, Alta., who will be admini-strator of the first American strator of hospital to be operated by the Sisters, St. John's Hospital in Lowell, Mass. Sister Mary Albert, administrator at Mineral Springs Hospital, Banff, Alta., replaces Sister Consulata. Sister Marie Albert is the new administrator at Mineral Springs Hospital. She spent many years on the staff of St. Martha's Hospital and St. Peter's Hospital, Melville, Sask.

Plaque Unveiled in Honour of A. J. Swanson

A plaque, honoring the memory of A. J. Swanson, was unveiled recently at The Toronto Western Hospital, Toronto, Ont. Mr. Swanson, who passed away last December, was appointed general superintendent of the hospital in 1930 and served until 1956 when he resigned to become the first chairman of the Ontario Hospital Services Commission.

During his career, Mr. Swanson played an active rôle in the affairs of both the Ontario Hospital Association and the American Hospital Association, being the president of O.H.A. in 1937 and

It was under his direction that the basic groundwork was laid for the multi-million dollar expansion program at The Toronto Western Hospital, now being completed.

Changes in Staff at U. of T. Dept. of Hospital Administration



Kerle G. Palin.

Kerle G. Palin, formerly administrator of Lachine General Hospital, Lachine, Que., has assumed, as of August, the position of research assistant in the Department of Hospital Administration, School of Hygiene, University of Toronto. On October 1 he was named assistant professor, replacing Hugh R. McGann who is now administrator of Chilliwack General Hospital, Chilliwack, B.C.

Prior to joining the University of Toronto, Mr. McGann was with the B.C. Department of Health as hospital consultant, having obtained his diploma in hospital administration in 1957.

Mr. Palin obtained his diploma in hospital administration in 1953, becoming administrator of Alexandra Hospital, Montreal, Que., before going to Lachine in 1958.

Dr. John E. deBelle

The death of Dr. John E. deBelle a few weeks ago was an occasion for sadness among his many friends in Eastern Canada.

Born in England, Dr. deBelle came to Canada as a child. He graduated in medicine from McGill University and, during World War II, served as a surgeon commander in the R.C.N.

At the Royal Victoria Hospital in Montreal, he held the position of medical assistant to the superintendent. But it was on his appointment as general superintendent of the Montreal Children's Hospital in 1937, and later executive director in 1952, that he found his real niche — working with sick

(continued on page 18)

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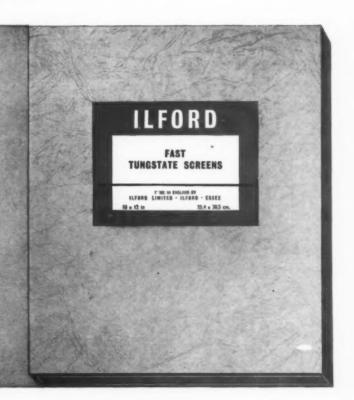
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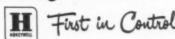
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(continued from page 12)

youngsters and, in his administrative rôle, lightening their lot as much as was humanly possible.

An indefatigable worker both within and beyond the hospital's precincts, Dr. deBelle's "extra-curricular" activities were many—service on the boards of the Montreal Hospital Council, the American Hospital Association (the first Canadian to serve on its committee on children's hospitals) and the Province of Quebec Society for Crippled Children; chairman of the technical committee of all Montreal social agencies studying problems of the chronically ill.

Dr. deBelle retired in 1958.

Director of Research and Statistics Division

The position of director of the Research and Statistics Division, Department of National Health and Welfare, Ottawa, has been assumed by John E, Osborne.

Mr. Osborne attended McMaster University and the University of Toronto, receiving a M.A. degree in economics, and later obtaining a Ph.D. in the same subject at the



John E. Osborne.

University of Chicago. Mr. Osborne joined the Department of Health and Welfare in 1951 as economist in the Research and Statistics Division where he conducted research in the field of hospital and medical care. From 1958 to 1960 he attended the University of Toronto, obtaining his diploma in hospital administration and receiving the Robert Wood Johnson Award on graduation. Afterwards he returned to the department as consultant.

Medical Director at South Peel

John C. Platt, M.D., has been appointed medical director of the South Peel Hospital, Cooksville,



Dr. J. C. Platt.

Ont. Dr. Platt graduated in medicine from the University of Western Ontario in 1957 interning at the Victoria and Westminster Hospitals in London, Ont. Dr. Platt also did two years of post-graduate work at the above university receiving his Master's Degree in business administration.

(continued on page 32)

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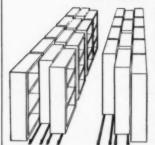
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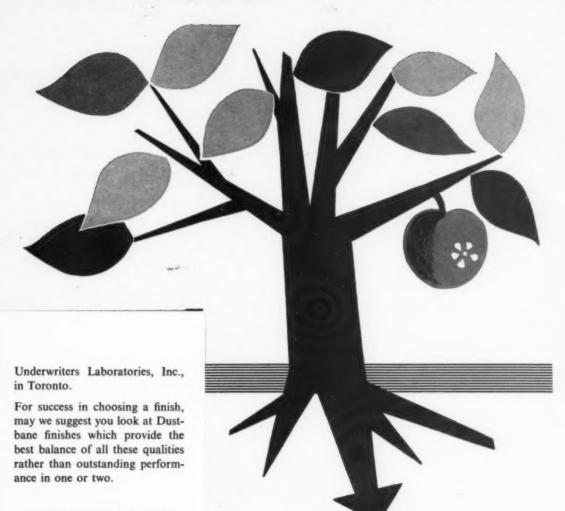
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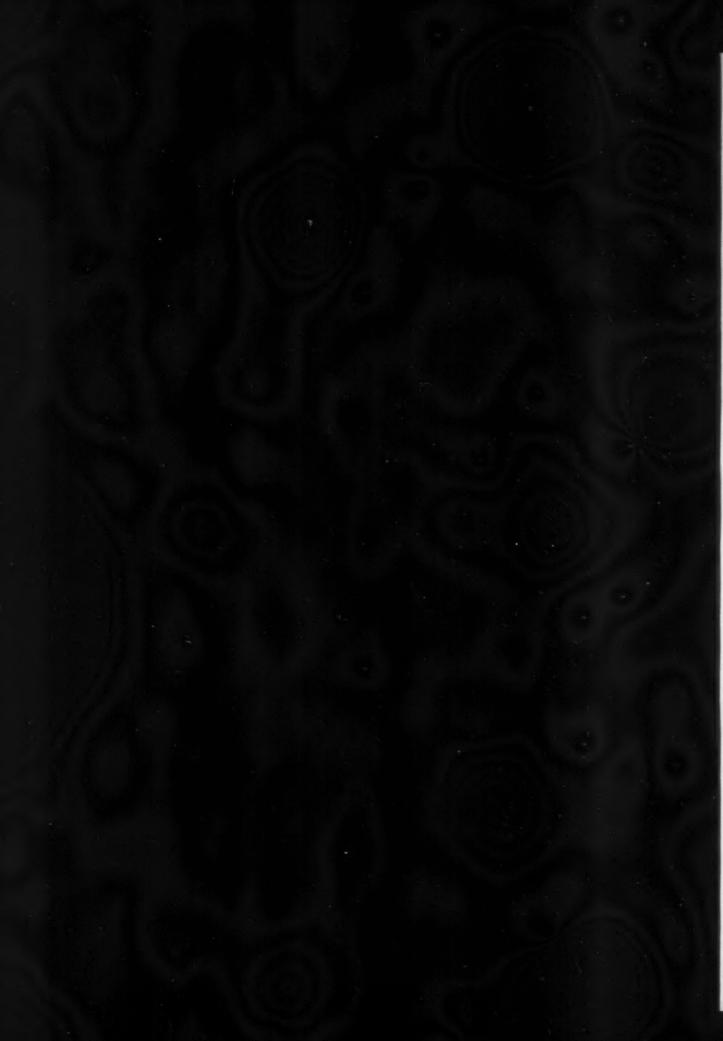
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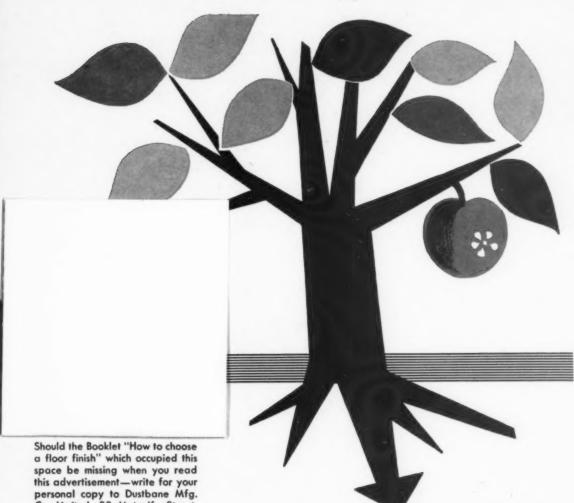
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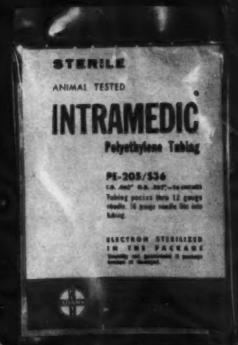
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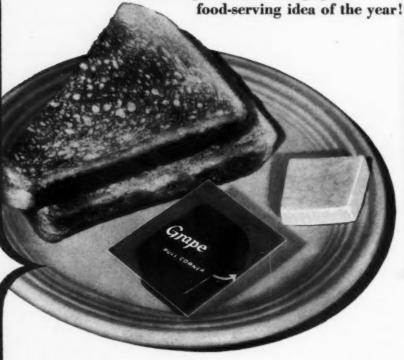
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Orange Marmalade Ketchup Mayonnaise Honey Syrup Tartar Sauce Mustard
Strawberry Jam
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French Dressings Salad Dressing Caramel Topping Strawberry Topping Chocolate Topping Mint Jelly

Free! Trial order! So you can see for yourself the truly unique advantages of PC Packs—try them at our expense! Mail this coupon and a Kraft representative will bring you samples of the PC's in which you're particularly interested. He is also available for full details on how you can best use these portions in your particular operations. Get in touch with him right away.

P.C.PACKS

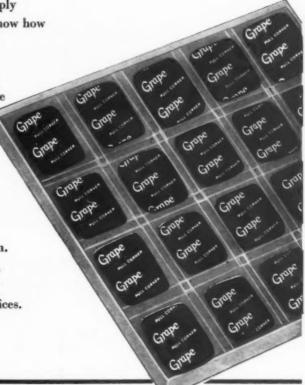
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Sby Kraft Foods Limited

(continued from page 18)



Assistant Administrator at Misericordia Hospital

The Misericordia Hospital, Edmonton, Alta., announces the appointment of J. Walter Smith as assistant administrator, succeeding A. C. Duncan who took the position of administrator at the Kenora General Hospital, Kenora, Ont.

Mr. Smith has had wide ex-

the perience in Misericordia Hospital, having held the position of purchasing agent, accountant and comptroller. He completed in 1960 the Hospital Organization and Management Course conducted by the Canadian Hospital Association.

Supervisor of Extension Course at C.H.A.

Phoebe Hardwick, formerly chief medical record librarian at the Humber Memorial Hospital, Weston, Ont., and a member of the Board of Registration, C.A.M.R.L., recently accepted the position of supervisor of the extension course for medical record librarians at the Canadian Hospital Association.

Medical Director Retires

F. Learn Phelps, M.D., medical director since 1925 of the Laurentian division, Royal Edward Laurentian Hospital, Montreal, Que., has retired from that post. Dr. Phelps, an honorary life member of the Canadian Tuberculosis Association, first became associated with the institution as a patient in 1913.



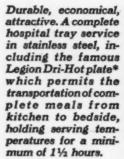
Appointment at Chatham Hospital

George I. Glover was recently appointed assistant to the administrator at the Public General Hospital, Chatham, Ont. Mr. Glover graduated in pharmacy from the University of Saskatchewan and received his Master of Public Health (hospital administration) degree from Yale University. He completed his residency at the Geisinger Medical Center, Danville,

(continued on page 156)

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(*A Legion item for transferring hot foods from kitchen to bedside, retaining temperatures for 1½ hours. Available to fit plate size from 7% to 10½ . O.D. "Patent pending U.S. and Canada".)



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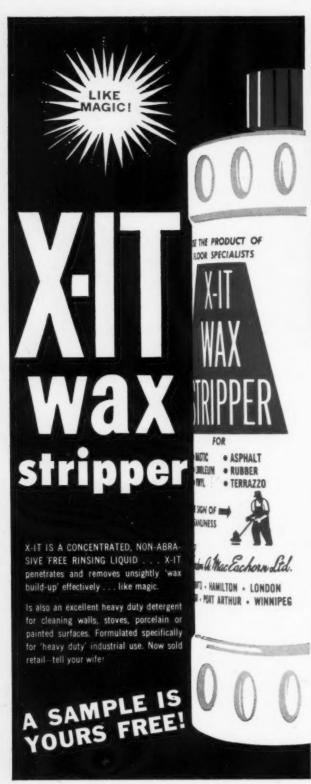
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However, we do have to tell you that for the first time you can obtain PYREX® jars at surprisingly low prices. May we suggest, therefore, that you ask your supply house for the current price list or drop us a note for completely illustrated Catalog MP-3. This includes a complete line of Applicator Jars, Hospital Jars, Tongue Blade Jars and Sundry Jars.

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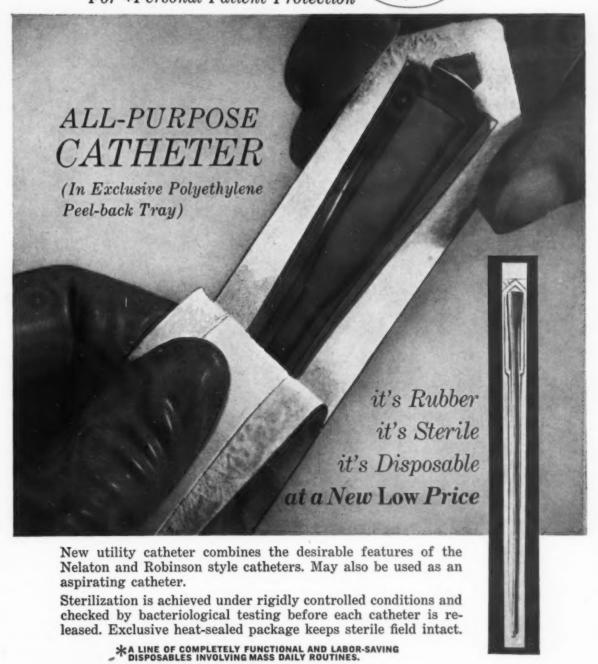
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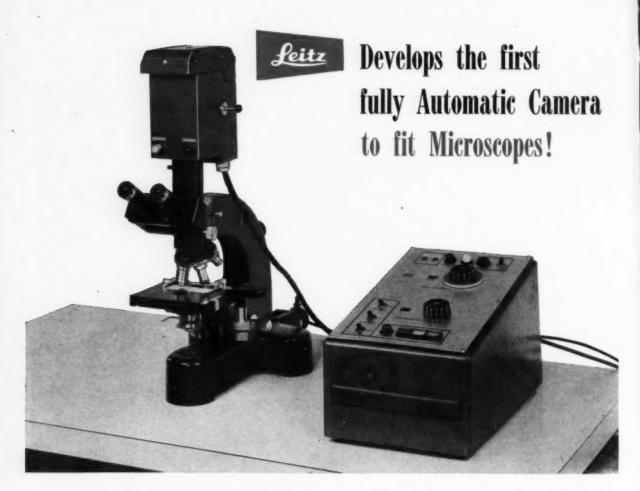
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The new Leitz "ORTHOMAT" fully automatic 35mm micro-camera represents a major "break-through" in the constant quest to find the ideal instrument for dependable results in photomicrography. Incorporating features which are more diverse than all other available equipment, the "ORTHOMAT" has been particularly designed for use with the famous Leitz ORTHOLUX and LABORLUX microscopes. Consider these remarkable features:

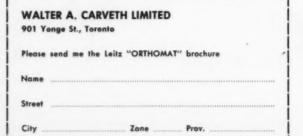
- Exposure is automatically controlled by a highly sensitive photo multiplier which actuates the vibration-free electric shutter, permitting exposures of from 1/100 sec. to a half hour or more.
- The ORTHOMAT is the first to achieve both detail and integrating exposure measurements, operated simply by two "push-buttons". An integrating measurement

determines the light covering the entire field, whereas a detail measurement permits measurement of a singledout detail within the field which differs in contrast or density from the surrounding area.

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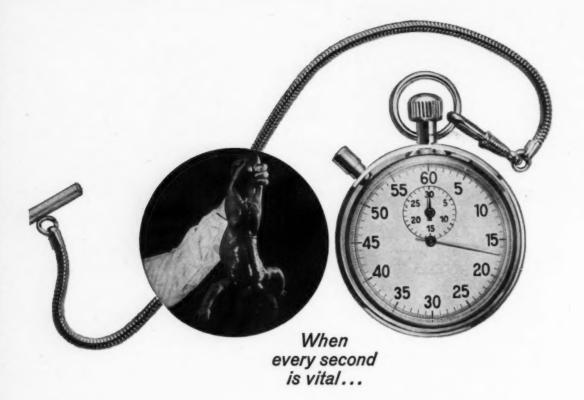
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W. Douglas Piercey, M.D.

New Legislation for Drug Control

A T the last session of the federal parliament, new legislation was enacted as a means of controlling certain types of drugs. These products are specifically: (1) amphetamine and its salts; (2) barbituric acid and its salts and derivatives; and (3) methamphetamine and its salts. Also, all pharmaceutical products containing any of these drugs, when in combination with other medicinal ingredients, are likewise subject to control. The reason for the control measures will be known to all who read the newspapers. There has been misuse and abuse of these drugs in certain areas. In fact, they have come to be described as "goof balls."

The means of accomplishing the required control are included in Amendments to the Food and Drug Act which became Part III of the Act. At the same time the new Narcotic Control Act was passed and this automatically repealed the earlier Opium and Narcotic Drug Act. Both of these changes in legislation became effective on September 15 of this year.

Officials of the Food and Drug Directorate, Department of National Health and Welfare, wish to stress that very stringent penalties (up to ten years imprisonment) have been provided for anyone trafficking in "controlled" drugs or in possession of them for that purpose. The types of control and records established by the new Regulations, insofar as hospitals are concerned, are identical with those which are in force for narcotics. Since hospital staff members are familiar with the latter, it is suggested that similar methods be adopted for "controlled" drugs.

This information and more will be distributed to hospitals in the form of Circular N-511, signed by Dr. C. A. Morrell, director, Food and Drugs Directorate, and Circular N-506, signed by R. C. Hammond, chief, Division of Narcotic Control. To these circulars will be attached copies of the Narcotic Control Regulations and the amended Food and Drug Regulations. If by any chance your hospital does not receive this important literature, will you please write promptly the Division of Narcotic Control, Department of National Health and Welfare, Ottawa.

Flurry Over Blood Transfusions

IN an August issue of Maclean's magazine there appears a deplorable diatribe—warning the public about the dangers of blood transfusion. We shall not give the authors further publicity by a mention here. This sensational piece has been well and thoroughly

refuted by the Canadian Medical Association' and we quote: "In our opinion the article gives a distorted picture and is a superficial and misleading treatment of a highly complex subject, amounting to a gross misrepresentation of the rôle and value of blood transfusion". No authority denies that there may be occasional risk in the use of this complicated and important adjunct to therapy, but why scare the pants off the public? We quote again from the C.M.A. edi-The use of any treatment involves a balancing torial: ' of risks in which the benefit to be achieved is measured against the risks inherent in the procedure: it is an exercise of professional judgment for which only the physician is prepared. The necessity for blood transfusion can be judged only when the specific patient's problem is examined in the light of sound clinical knowledge."

Moreover, according to the C.M.A. the article in *Maclean's* "ignores the many medical and surgical procedures of recent origin which depend entirely upon the availability of large amounts of blood". And here is where it may have done real harm. Should there be widespread loss of confidence in this type of therapy, it could "jeopardize the slender supply of blood now available for transfusion purposes."

Therefore, a duty falls upon physicians, hospital administrators, and every individual working in the health field, to assist in the gradual neutralization of any harmful effects caused by this public indictment. This can only be done by careful explanation on the part of those who are well informed. May we leave with you the words of Dr. Paul G. Weill, director, transfusion service, Royal Victoria Hospital, Montreal[†]:

"Among doctors over 45 years of age practising medicine today there must be very few who at one time did not have to stand helplessly by while a patient's life slowly slipped away because there was no blood available to replace what had been lost through a wound, an accident, an operation or a delivery. It is well-known that the establishment of blood banks at the outbreak of World War II changed all that and made possible the saving of hundreds of thousands of lives in military and civilian medicine ever since."

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The Canadian Medical Association Journal, pp. 658-661, Sept. 9, 1961, Vol. 85.

Canadian Doctor, pp. 25, also 36 and 37, Sept. 1961,
 Vol. 27

A STUDY IN FLEXIBILITY

the Hutchison wing of the Peterborough Civic Hospital

James S. Craig



New dining terrace and Hutchison Wing.

ARCHITECTS

Craig and Zeidler, Peterborough and Scarborough

HOSPITAL CONSULTANTS

Agnew, Peckham and Associates, Toronto

The Problem -

To add 140 beds to an existing 257-bed hospital.

To provide services for the 400-bed hospital.

To allow future expansion of nursing units and services for an ultimate 600-bed hospital.

Present additions and alterations to be arranged to allow future growth with minimum interference to normal operation of hospital.

New nursing units to be readily converted to suit planned development of progressive care nursing program.

Basic solution -

Service areas

Expansion of existing service wing to north.

Concentration of majority of services on first floor for easy future expansion.

Rearrangement of fourth floor surgical suite for future expansion with minimum interference.

Nursing units New wing housing all additional beds.

New nursing units readily converted to suit future

Future additional 200 beds to be in another separate wing.

Main Features

THE new wing, named the Hutchison Wing in honour of Peterborough's first permanent doctor, serves many and varied functions without compromise of space requirements. The ground floor contains the large physiotherapy department with room for expansion and a psychiatric treatment unit serving the adjacent mental health clinic in the east wing and the psychiatric nursing unit above.

The first floor is a 26-bed psychiatric nursing unit directly connected to the treatment area below by private stairs at the nursing station. This unit also provides more than 40 square feet of common room area for each bed which is necessary for the proper treatment of psychiatric patients. The common room areas consist of small quiet conversation rooms, lounges, dining room, occupational therapy room, library and several interview rooms.

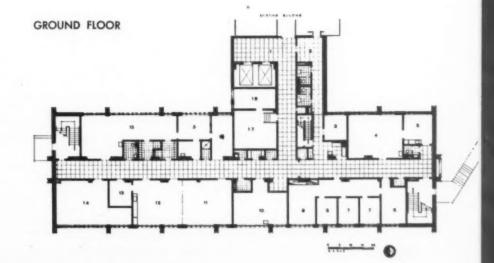
The second floor is a specially laid out paediatric nursing unit of 41 beds which, by the particular arrangement of isolation rooms at each end of the corridor, allows flexible use of the rooms as either isolation or normal treatment bedrooms.

The third and fourth floors each contain a 36-bed convalescent, chronic nursing unit and the fifth floor, left unfinished at this stage, will contain a 40-bed active nursing unit.

The varied lay-out of rooms and space on each floor called for an equally varied lay-out of windows, unless a compromise was made regarding correct size of rooms or correct relation of windows to the room lay-out. The use of an abstract "mondrian" pattern in the arrangement of windows in the exterior design overcame any need to compromise with the room lay-out desired on each floor, resulting in a four per cent over-all space saving and in addition providing a variation of window treatment and room design on the third and fourth floors which are otherwise similar. The freedom of this rhythmic pattern on the exterior allows the fenestration on each floor to be determined solely by the interior requirements of each room.

Entrance to new wing.





- 1. elevator hall 2. waiting room 3. office
- 4. recovery

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- 5. treatment
- 6. psychiatric
- 7. social worker
- 8. psychologist
- 9. secretaries
- 10. hydrotherapy
- 11. gymnasium
- 12. occupational therapy
- 13. equipment stores
- 14. unfinished
- 15. electrotherapy
- 16. waiting room
- 17. mechanical equipment
- 18. electrical room





Above: interior of new cafeteria with dining terrace in the background.

Bottom: typical two-bed room.

Special Features in the New Wing

1. The connector joining the new wing to the east wing of the original hospital allows at each floor level an interchange of bedrooms from one nursing unit to the other. This flexibility is most clearly illustrated on the second floor where an increase in the paediatric nursing unit could be readily obtained by adding rooms from the east end of the original east wing to the paediatric nursing unit.

2. The two additional elevators in the new connector are centrally located to serve the new wing and the east wing. The connector also serves as a visitors' waiting area and a patients' lounge on the second, third and fourth floors. On the first floor there is a separate entrance for the Hutchison

Wing visitors.

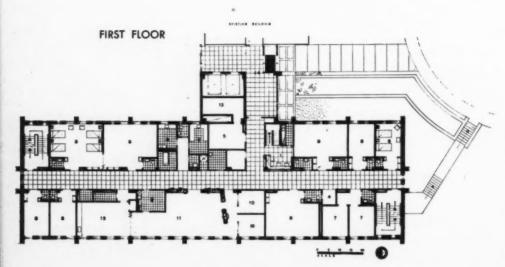
3. All services such as nursing stations and utility rooms are located centrally in the wing to provide for the most efficient traffic flow.

4. All corridors and common rooms have oak handrails at the walls which also serve as wall bumpers in the corridors, pantry, et cetera. The handrails are greatly appreciated by convalescent patients.

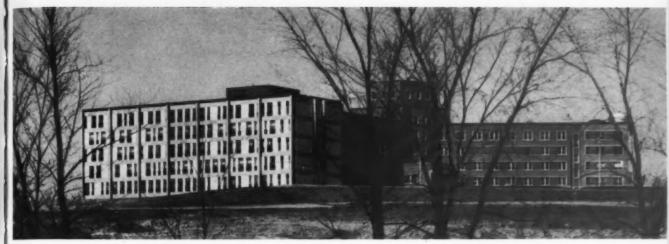
5. All window units are of heavy aluminum extrusion with thermal break in both frame and sash and sealed double glazing. The ventilator sections opening in are screened on the outside and all fixed panels open with a key and swing in on heavy hinges for inside cleaning. These windows are specially designed with a double weather strip contact which provides the highest air infiltration

In the interest of good economy and future flexibility the exterior walls are curtain walls throughout with 2 feet or 4 feet wide standard window panels separated by masonry panels of varying widths. Changes in room lay-outs required on any floor in the future could be fitted into this pattern of solid and window panels by a reasonably easy change in location of the panels. The structural framing of 24-foot bays allows an almost unlimited arrangement of window pattern to suit any room lay-out.

On the interior, only the stair enclosures at the ends and the service core at the centre are built of

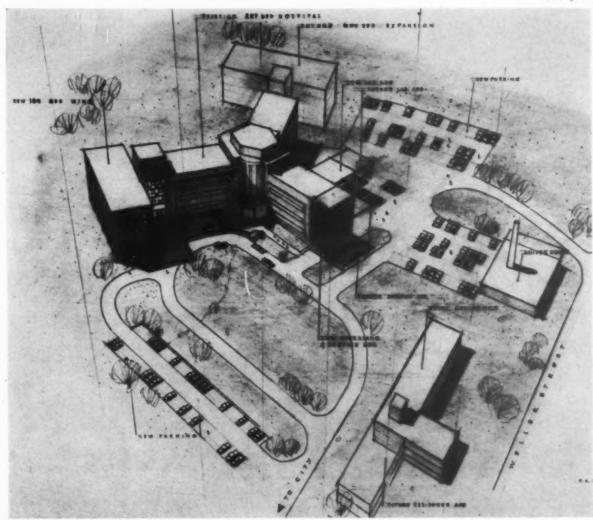


- 1. nurses' station
- 2. clean utility
- 3. soiled utility
- stretchers 5. library and interview
- 6. servery
- 7. one-bed room
- 8. two-bed room
- 9. four-bed room 10. quiet room
- 11. main day room and dining room
- 12. occupational therapy 13. duct room
- 14. elevator hall



Hutchison Wing from main approach.

Site plan.



OCTOBER, 1961

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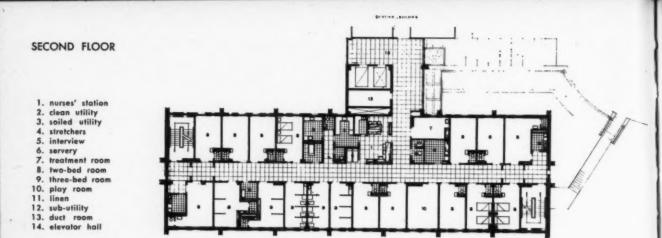
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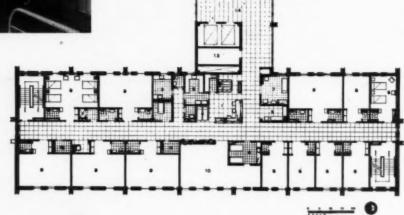
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The recovery room.



THIRD FLOOR

- nurses' station
 clean utility
 soiled utility

- 4. stretchers 5. waiting room

- 6. servery a
 7. treatment room
 8. two-bed room
 9. four-bed room
- 10. common room
- 11. linen
- 12. storage 13. duct room
- 14. elevator hall

Physiotherapy department exercise room.



Dishwashing room.

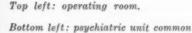


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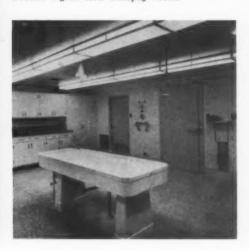
CANADIAN HOSPITAL







Bottom right: new autopsy room.



masonry partitions. All other interior partitions are constructed of steel studs with special sound isolator clips supporting the lath and plaster on each side. This type of partition provides, first a better sound barrier than a solid masonry one and, second allows easy installation of further wiring, piping, et cetera, from the ceiling space above. Services could thus be added without disturbing the finished plaster walls of the rooms.

Ceilings throughout are constructed of removable acoustic tile panels, supported on Z bars at two-foot centres. The ceiling is hung below the structural slab, leaving space between for the distribution of future service piping or wiring and for easy access to valves, ducts, et cetera, of the present services. This full acoustic ceiling throughout also provides a much greater control of noise and therefore adds to both staff and patient comfort.

All interior furnishings and colour arrangements were chosen by the architects and John MacKay, the administrator. A system of colour harmony was established for the patients' bedrooms using four wall colours, four floor tiles and three curtain materials. Each of the three curtains can be used with any of the nine combinations made up from the floor and wall colours. The three different colours of vinyl upholstery for the furniture were also carefully chosen. This system makes it possible to inter-

change any curtain or upholstered chair from room to room without destroying the colour harmony in each room. It also gives variety to the bedrooms, obliterating any institutional monotony. However the minimum number of colours and materials provides simple and easy maintenance and repair.

All other rooms in the new wing used the basic floor and wall colours with the addition of different curtain materials for offices, common rooms, et cetera. The furniture in the lounges was similar in design but of different colours to provide variety. In all cases furniture can be moved from one area to another without destroying the colour harmony.

In addition to the new Hutchison Wing the major changes and additions to the original hospital were as follows:

1. Service wing extended to the north containing expansion of admitting and emergency departments — first floor; administration area — second and third floors; surgical suite — fourth floor; and obstetrical suite (unfinished area) — fifth floor.

One storey and basement wing west of the north wing contains new laboratories, new central sterilizing area, and new dish-washing area.

3. One storey extension of cafeteria dining room between east and west wings.

4. Changes on first floor east wing to provide a new 19-bed intensive care unit. ■

Orientation -

What's in a Name?

WE often read and hear about orientation, the reasons for its existence, and how it should be carried out. In many instances we practise orientation in our hospitals, and the word forms part of our jargon just as it does in industry. The extent of our orientation programs varies from hospital to hospital — from the personnel director and department heads talking to the employee on arrival to a comprehensive program following the employee throughout his stay with the institution. The fact that there is such a variation can create a problem in framing the appropriate response to the query, "Do you have an orientation program?" The concern about the word, "orientation", is not new, nor is the realization that we in hospitals take it to mean various things at different times.

This question was raised at our hospital during a workshop on personnel administration, the purpose of which was to enable the department heads and their assistants to discuss certain specific points in this field and to bring forward the results of their discussion in the form of a report for the benefit of the entire group. In the topics to be considered, orientation was given priority because each person thought it extremely important, and felt that each member present should be fully aware of exactly what was involved or should be involved in an orientation program.

When the discussion arose, an attempt was made to define this term, "orientation." Some considered it to be related to a specific period of time at the commencement of employment; others felt that orien-

Gerald P. Turner Toronto, Ont.

tation was in effect an on-going thing; while still another segment of the group considered this to be an on-going program related only to the hospital in general, not part of the on-the-job training or in-service education follow-up relating specifically to the performance of the job.

It was not long before the group was bogged down in terminology and semantics with respect to the timing and relationship of orientation. At this point a dictionary was produced which did not provide any enlightenment. Needless to say, a great deal of discussion then took place with respect to the periods that one should set aside for orientation and what was specifically meant by this word.

It is not my intention to detail the complete discussion as it occurred, or to present a model orientation program. What I wish to do is indicate the end result of the group's deliberations. This was that we in hospitals should be concerned with a total employee program, and it is not important what name we give to this so long as we understand what it means. The terms orientation, job training, in-service education, job evaluation, workshops, all form an integral part of the total employee program. Each one in itself can only be effective if it is related to the master program; and although we often consider these elements as programs in themselves, they are in reality only part of a continuous total program.

We often justify the creation of these individual programs in terms of job efficiency, esprit de corps, turn-over ratio, and dollars and cents. Tied in with this, although not always brought to the fore, is the factor that through these programs our employees will stay with us longer and become more efficient, with the end result that the hospital will provide the best possible patient care. The reasons for having these programs may be good ones but it does not necessarily follow that the end results will be what we wish. In many instances the reason that we do not obtain the maximum benefit from them is the lack of a uniform thread which binds them together to form a total employee program.

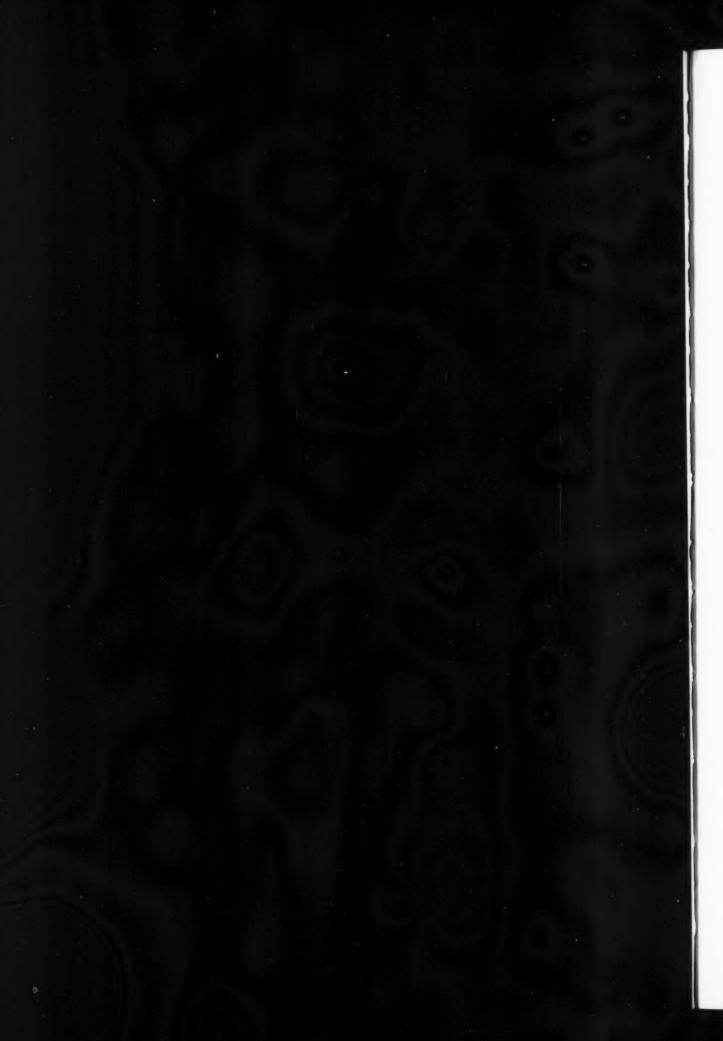
This thread consists of two components: the first is the basic reason for the hospital's existence to provide the best possible care for patients; the second is the recognition of the worth of the individual and the realization that only by fostering this worth can the primary objective of the hospital be reached. These two vital factors are the threads which bind the programs together, breathe life into them and give them substance and meaning. They are the most compelling reasons for the existence of such programs.

It was felt that we should not create programs in our hospital just so that we can say that we have this or that program and are therefore keeping pace with our sister hospitals that we dare not get wrapped up in systems and education unless these can be justified in terms of what is best for the patient. Our focus must never waiver, and we have to guard against slipping into a rut - doing things simply for the sake of the doing, with the possible result that the changing demands of patient care become an annoying interruption to a well-worn routine.

It is my contention that only when the threads of patient care and the personal worth of the individual are prime factors in motivating programs can we say that these are successful in reaching our objective. We must also realize that we provide our care primarily through people, and unless we concern ourselves with a total program which provides not only the reasons and the inspiration, but also the tools in the form of methods and equipment, we will fall short of our mark. Therefore, let us not be bemused by definitions, but rather let us concern ourselves with formulating a total employee program which commences on the initial interview and ends only when the employee leaves the hospital.

The author is assistant administrator at New Mount Sinai Hospital, Toronto, Ont.





Ethical Conduct

H. D. Knox Winnipeg, Man.

WHAT is meant by "ethics"? Various dictionaries explain it as "a study of standards of right and wrong", "that part of science and philosophy dealing with moral conduct, duty and judgment", "formal or professional rules of right and wrong." Any of these definitions clearly indicate that purchasing agents should examine themselves with a view to determining whether they are producing the very best that is in them.

Ask yourselves if your day-by-day operations stand up under a close scrutiny, not by the finance board and the auditors, but by your own investigation along the following lines: ethics in relation to management, to your suppliers and to your own reputation.

Ethics in Relation to Management

With the firm establishment of the principle of centralization of purchasing, most hospital managers and boards have been content to turn over to the purchasing agent the sole responsibility for the spending of a large part of the hospital income. How are these duties and responsibilities discharged in your department? Are you content to establish certain procedures for your routine work and then let the procedures run on and on without review, or do you consider your rules every so often so that they can be amended to meet changing conditions? How long is it since you examined your methods of obtaining prices? Is the method still as satisfactory as it was when you started it? Are the records of purchases reviewed? Do they still provide you with the information you want? Is there more information than you need? Is your method of checking quality still effective? Are records of in-coming shipments giving you the story that you want or, conversely, do they tell you more than you need to know?

No system is ever perfect; therefore, there is a constant need to check and re-check your methods.

Ethics in Relation to Suppliers

A common fault in the purchasing field is to establish a source of supply for a product and then continue to deal with that source forever. You may take the attitude that you were right last year, and therefore, without any more investigation you are always right. This attitude is wrong. You should constantly examine your sources for the prices they charge and the service they give to ensure that you are getting the best product and service available at the time.

From an address presented at the Manitoba Hospital and Nursing Conference, Winnipeg, 1960. The author is purchasing agent for the University of Manitoba.

How many vendors do you use because of convenience? Or because their quick delivery covers the incompetence of your stock records clerk? You are constantly driven by emergencies in this business, but do you try to improve your system to reduce the number of emergencies? I know of one individual who boasts of the equipment that he can borrow for his company because he deals with a certain vendor at all times. If he were smart, he would total the cost of doing business with that particular concern. (It has been my ex-perience that by buying on the open market he could save enough to buy outright all the equipment he thinks he is getting free.) Never be satisfied that any vendor is the last word in meeting your

When you enlist the help of a salesman to advise about a certain problem, do you have an understanding with him, before his help is requested, concerning whether he is to receive automatically any business that results from his advice? Do you advise him that the information he provides will be the basis of your asking for a broad list of quotations? Do you inform him that a straight advisory fee will be paid to him for the time he has spent on the problem? Any of these approaches have their merit, but your position should be made quite clear before you embark on the project.

When you receive quotations on any commodities, do you use this information for your own needs or do you bandy it about to competitors? Dickering has its place in purchasing but this dickering should not take the form of giving information indiscriminately to other vendors. In some offices it is common to hear the statement, "Well, your price in \$X higher than your competitor's. If you bring it down to his level, we will

be glad to do business with you". This is the wrong approach, and if used, it will drive the price down to the point where no one will be able to provide the goods without losing money. In effect, it will eventually drive small firms into bankruptcy, and a bankrupt supplier has no value to a purchasing agent. The worst outcome from such a procedure is to have vendors lose out in doing business - with the result that there will be only one supplier left in the field. You will then pay the penalty of having to take the price of this one remaining source, whether you like it or not, with the resulting loss of value to your institution. It is good business procedure to keep all vendors interested in you.

In making contract arrangements, it is to your benefit to make them as attractive as you can to the supplier so that in his turn he can reduce the costs of handling and thus produce a more

Following is a symposium of eight articles presented at the purchasing institute held by the Associated Hospitals of Manitoba in co-operation with the C.H.A., Winnipeg, February, 1961.

in LARGE and SMALL hospitals

IN the purchasing field the same basic principles of utility, safety, reliability and economy apply to the large as well as the small hospital. In both there must be good buyer-seller relationships.

What, then, is the difference between the purchasing function in a large hospital and a smaller unit? There are two conditioning factors which generally apply-size and geographic location. In the larger hospital, purchasing is usually centralized in a department under a full-time or at least part-time purchasing agent. This offers the possible advantage of having a more highly-trained and experienced person to do the job. Such a person will have more time than the harassed departmental executive in a smaller unit to study and compare goods offered, and at times to visit the various suppliers for the purpose of looking at their displays and stocks. On the other hand, in the larger situation the purchasing agent is further away from the place where supplies are being used by the worker, and for this reason, he may not be able to judge how well his purchases are doing what they are supposed to do.

The author is administrator of the Winnipeg General Hospital, Winnipeg, Man.

Bulk-buying

One benefit of size is that the larger unit can take advantage of bulk-buying, with the accompanying discounts on larger quantities. This may require more storage space, but it is not so much of a problem any longer with many companies willing to ship the goods in smaller lots on a regular schedule—"drop" shipments as they are called. This advantage can sometimes be a disadvantage today, however, because of rapid advances and changes in equipment and supplies. If one gets too enthusiastic about bulk-buying, one may find large stocks of obsolete supplies left on the shelves.

Geographic Location

There is usually a direct connection between the size of a hospital and its geographic location. Larger hospitals are commonly found in big cities and are, therefore, closer to warehouse supplies in case their stocks run out. This means that inventories do not have to be so large because the warehouse is almost as near as the telephone. But this can lead to casualness at the minimum stock or re-order level, which in turn may result in inconvenience at the hospital

economical price per unit for your institution.

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y e h When placing orders, assessing needs and getting quotations, try to arrange your ordering so that you can obtain shipment as far back on the supply line as you can. The larger the quantity that you contract for, the fewer people you need serving you between the manufacturer and the dealer, and the lower the price.

Ethics in Relation to Reputation
Finally, what is right and what
is wrong with the way you treat
your own reputation in the
business world? Are you known
to be fearless when it comes to
defending the principles that
guide your business life? Do you
allow personal feelings to affect
your judgment when awarding
business to vendors? What is
your attitude toward such offers
as free meals, week-ends at the
lake, large Christmas presentations, tickets to symphony concerts
et al? Do you think for a minute

that such gifts from suppliers are made to you because you are good-looking, or because you have a pleasant personality, or that they just cannot resist your charm? Or are they made to influence your judgment? Do not think for a minute that such things are free. You may not put your hand in your pocket to pay and it may not cost your institution money, but if you let these things get out of hand then you will pay with a piece of your soul, or the loss of your self-respect. It has been said, and can be considered a great example by which to guide yourself, that if you receive anything in the nature of a gift which you are ashamed to show around the office, then you are treading on dangerous ground and should examine your methods.

Do you visit other departments and vendors' establishments? Visiting other departments makes you realize that you are not the only person in the organization who has problems. Visiting vendors' establishments gives you an opportunity to assess the potential of any supplier and will tell you in a minute why you seem to have trouble with certain suppliers in the manner of careless deliveries or accounting, and it will give you an opportunity to discuss such problems with the people concerned.

When you have stated requirements, do you rely solely on those firms that call on you regularly, or do you do a little thinking about your needs and about the people who should be able to provide you with the goods and then endeavour to interest them in your business? It may be that there are many vendors who could help you but they have just never got around to calling on you to introduce themselves. This fact should not be allowed to keep you from approaching them, for, as I stated earlier, it pays to keep everybody interested in doing business with you.

L. O. Bradley, M.D. Winnipeg, Man.

if the suppliers' stocks are low and the order cannot be filled at the last minute.

While one of the advantages of location in a big city is that salesmen are as close as the telephone, they may be even closer—ringing the doorbell. This entails expenditure of time, particularly when there are a half dozen or more suppliers selling the same type of product. With a large order in prospect, these gentlemen can be very persistent and may cost the hospital a good deal of executive time. It is possible to offset this to some degree by careful preparation of specifications before placing orders for goods.

The proximity to sales headquarters tends to make the larger city hospital a good target for new products which have yet to prove themselves. It is always a good selling point to smaller hospitals to hear from the salesmen that the "big" hospital is using their product. While this may have the advantage of getting a good product into service early, it means that the larger unit may be caught with poor or faulty equipment.

Specialized Equipment

Large hospitals have a unique problem which arises from their high degree of specialization. Today's advances in medical science have introduced intricate mechanical, chemical, and electronic equipment. Medical reports from larger medical centres bring news of great good for the patient with a piece of new apparatus. Young men who are highly trained and specialized come back from these centres full of ideas, vim and vigour. So before you know it, you are buying, or trying to find sources to help you buy, fancy new equipment. An example comes to mind in the recent purchase of a piece of x-ray equipment called an image intensifier. One of the early models was ordered. About the time it was ready for delivery, the same company introduced a later model that was much better. Fortunately, the company itself moved quickly and suggested that the first order be cancelled and the more recent model purchased, otherwise the hospital would have spent \$35-40,000 on an obsolete piece of equipment.

Another example, which should be a lesson to those in the big hospital, is what happened a few years ago when polio was in full swing. There was a great demand for artificial, automatic breathing machines for those patients with respiratory weakness or failure. In the rush to get the best and latest equipment for a patient, one hospital purchased a \$1,000 electrical stimulator. In theory, it should have been a good piece of apparatus, but it was never used.

Some of this, of course, is the price of progress. A certain amount of testing and research must be done on equipment and supplies, but it can prove expensive for the large specialized hospital. One of problems introduced with specialized equipment is maintenance. Some of it is so complex that even the larger cities have no trained experts to service it; and it seems that a hospital is criticized more when a specialized piece of equipment breaks down than if the equipment had not been bought

Drugs and Medical Supplies When two or more doctors are

gathered together, they may not agree. Indeed they are likely to disagree. Each of them wants a different sedative for his patient, or a different brand of the same type of sedative. This happens in both the small and the large hospital, but in the latter the problem is compounded by the size of the medical staff. One of the disadvantages of the larger centre is that the detail man who introduces new drugs can see a great number of doctors in a few days, and this may result in a sudden demand for a new drug. It is harder to resist these demands when the product can be delivered in a few minutes. In other words, there are advantages in living some distance from the warehouse.

Pressure on Buying Policies

One of the problems in the small hospital is the decision whether to buy at retail or wholesale prices. In larger hospitals this problem

. . .

does not often arise, but there are other economic pressures. The hope of donations from large suppliers to the building or equipment funds of the large hospital can be used as a pressure on the buying policies of the hospital board and vice versa.

Another problem may appear in the purchase of bread or milk. Several large, very competitive companies may offer exactly the same price, perhaps because of government quality requirements. Should the hospital deal with one supplier for a whole year, or pass the contract around among three or four, to give each one a share? Tendering may have the advantage of reducing prices at times, but it introduces the problem of choice when several are exactly the same, or when the supplier you like best is a fraction of a cent too high.

Unions and Chambers of Commerce are found more commonly in

53

100

large centres. One cannot doubt the advisability of buying local products if the price is competitive and the quality good. Unfortunately, when recession threatens, the cry of free trade dies down, and restrictions for local advantage gain support. It is not unusual to find subtle pressure on larger hospitals to buy locally manufactured goods which may not completely fill the bill. This experience is less likely to occur in smaller hospitals. Today, when hospitals are under close scrutiny for cost and safety of operation, it seems important that the soundest principles of buying be followed in the long run, even if this seems difficult in the short haul.

Storage and Distribution of Supplies

The large hospital has more people coming and going — more staff and strangers — than the (concluded on page 142)

In the hospital the procurement function, along with ten or 15 other departmental activities, must fit into one of the most complex institutional organizations in our society. This complexity arises from the variety of services provided by so many specialized personnel.

Administrative policy should be set as to whether purchasing will be centralized or decentralized. Many hospitals use "limited centralization". They include my own, in which the purchasing department arranges for all supplies, equipment and services other than pharmaceuticals, food and new building construction.

Objectives of Purchasing

Once the general policy has been established, the objectives of purchasing may be stated as follows:

 To secure hospital materials, equipment and services of specified quality and quantity at the time and place needed, and as economically as is consistent with the quality and service required.

To do this with a minimum investment in materials and supplies consistent with safety and economic advantage.

To avoid waste, duplication and obsolescence with respect to materials.

4. To promote and conserve good vendor relations.

The author is administrator of Brandon General Hospital, Brandon, Man.

Scope Functions Relationships

5. To conserve the time of department heads and others by relieving them of the activities and negotiations involved in purchasing.

A. K. McTaggart

Brandon, Man.

 To furnish timely information to officers and department heads on market conditions, trends, and their possible effects on the supply and price of materials,

7. Through specialized training, to achieve these objectives at less cost than could be done otherwise.

Scope

Purchasing is carried on, not for its own sake, but to implement other phases of the hospital operation. It is a supply service touching every facet of hospital activity.

The purchasing department should direct the search for sources of supply; supervise the development of new sources; conduct negotiations; make commitments and maintain suitable records. The purchasing agent should help all other

departments to determine the most suitable materials for their needs. He should also participate in all "make or buy" discussions and decisions.

Finally, the purchasing department should dispose of all scrap, obsolete and surplus materials to the best possible advantage, and report on these disposals to the accounting department.

Sources of Supply

Before arriving at decisions regarding sources of supply, the purchasing agent should co-ordinate all the knowledge and experience of the other specialists in the hospital about materials or equipment to be purchased and sources from which they may be obtained. In selecting sources of supply, the purchasing department should act in the best interest of the hospital at all times, but should simultaneously strive to create and maintain good vendor relations.

Any transaction between the hospital and a vendor in which materials, equipment or services are exchanged for financial or other considerations involves a contract, the mutual undertaking and obligation of which should be a matter of record and handled only by the purchasing department. No negotiation should be conducted or concluded without the knowledge of the purchasing department. Failure to follow this approved procedure will result in the hospital's possible refusal to honour invoices. No person other than members of the purchasing staff should commit himself to any vendor on preference for any product or source of supply; nor should he give out information regarding competitive performance, final approval or price.

Duty and Authority

The purchasing department must recognize that successful operation depends on the type of job it does in procuring supplies and services necessary to the operation of other departments. However, the most effective functioning of the purchasing department is possible only when others plan their requirements adequately.

The purchasing agent specifically should have the duty and authority to ask for reconsideration of specifications or quantities if it appears that the interest of the hospital may be better served by such a request. The final determination, however, is the prerogative of the agent, except where other departments involved are unable to reach agreement. When this happens, the matter must be referred to the administrator for arbitration or final decision.

Relationship to Management

The purchasing department is a combination of both staff and line organization. Its staff characteristics are that it serves the entire organization, and offers an advisory and consultative service to top management and the various departments.

Its line characteristic is that procurement in larger hospitals often has operating responsibilities of its own with intra-departmental relationships. In a number of instances the department also takes action on its own initiative.

Being a mixture of both line and staff organization, purchasing might be better described as an auxiliary service — a term, borrowed from public administration, meaning one which centralizes cer-

(concluded on page 104)

Mapping the

Work Area

A. W. Trimble Winnipeg, Man.

THE emergence of the office of purchasing agent has indicated the need for more organization in this area of the hospital. In the beginning — in some of our older hospitals — and now in some of our newer ones, its seems that a game was played in the planning of the buildings. If there was any space left over in the process of allotting areas, then that space was called storage. And in this game, the definition of storage was "We'll call it that for now, maybe we can find some use for it later." And thus that room with 13 corners on the second floor, that small closet away down at the other end of the corridor became "storage." Thus the word corridor became synonymous with storage area in most places. These deficiencies are well known now, if the frequency of complaints is properly noted.

The reasons for these deficiencies are fairly obvious. Most of our earlier institutions have just grown like Topsy. More than likely the first establishment of the hospital was the conversion of a residence to the care of the sick, or a doctor's house expanded to care for his patients. In addition to caring for the medical needs, it was discovered that other facilities were needed and the Florence Nightingales found that in addition to applying a bandage in the most acceptable manner of the day, a potato had the particularly unsavoury habit of requiring to be peeled before being boiled and served. And so they struggled along, accepting their fate, bandaging and paring. Gradually it was possible to establish the principles of a hospital, as such. Provision of food, medical supplies, et cetera, was on a hand-to-mouth basis — obtained when needed and quite often improvised.

Comparison of hospitals from the early days to the present time enables us to put into proper retrospect the new facilities developed recently which are arising out of those early institutions. Our servant, science, has made it possible to revolutionize methods and systems radically. For every great stride in physical science there are untold revolutions in all related fields. For instance, could you today visualize a hospital without electrical power? It was not too long ago that "galloping conductors" threw several Winnipeg institutions into chaos by causing electrical failures. Nor was Winnipeg the only victim of this phenomenon.

With the emergence of the purchasing agent and the area of endeavour encompassed by this individual or group, attention has been finally and rightfully focused upon the area of the hospital wherein this occupation is to operate. Purchasing means acquisition, and acquisition now is no longer on the hand-to-mouth basis. Storage cannot be any left-over space but must now be properly planned, integrated, allocated areas. When one sorts out the various and complex facilities of a hospital, it is easy to understand the necessity for organization in the purchase, control and management of the supplies required. Most of the following remarks apply to a hospital whose size necessitates the establishment of a separate purchasing

The author is a member of Moody and Moore & Partners, Architects, Winnipeg.

department. In many instances the post of purchasing agent is taken on by some already hardworking and willing horse; in the rare case the purchasing agent refers to a staff whose combined efforts realize the functions of the name.

Purchasing can be broken down into three operations - procurement, sorting into storage and dispatch to use. Another aspect which may fall within this range of operation is the dispatch of subsequent waste materials. All of these operations must be done speedily and

without waste effort.

The stores department has a need that is common to almost every other department of the hospital to have as ready an access to the central core of the hospital as possible. Due to the dependence of the kitchen on the stores department, these two units must also be located closely together. Separation of them may result in increased use of equipment and a rise in costs, necessary to transfer stock

over greater distances.

This call for a large number of facilities to be placed near the centre of the hospital has given rise to what amounts to the contemporary hospital mass. It is quite common now to see a hospital plan with a large spread-out ground floor with a tower of two or more typical ward floors above. Timecost studies taken in various institutions have proven the value of proper placement of service facilities, resulting in saving of dollars and cents in operation. And if there is one place where modern hospital management is moved to break with tradition, it is when a change affects a saving in the account book.

The Stores Department

Consideration of the stores department almost starts by assaying the property lines surrounding the hospital. One prime consideration here is the route of the goods delivered from the outside to the hospital. With mass purchasing finally established many of the goods come by highway transportation, as well as by local vehicles. This requires that the grounds of the hospital be big enough to accommodate large transportation units. At the rear the outside grade can be lowered to provide a loading dock at a proper height. This is usually about four feet below floor level. The truck backs up under a weather protection canopy or enclosure and in doing so backs into a levelator unit - of which there could be at least two. As soon as the truck

is in place an automatically operated ramp is there at the proper level and the order comes tumbling into the receiving area. checker ticks it off for transfer to storage and entry upon the perpetual inventory. Sometimes, due to limitation of the property, the storage area is below this level and the transfer of goods to stock is facilitated by the freight elevator located near by. Ideally of course, it is wheeled right into storage on the same level. In the storage room the produce is stocked in its proper spot - at the allocated area on the floor if it is a large bulky article - or on the bank of adjustable steel shelving set at the desired spacing for any particular stock.

Lay-out of the Department

Natural light is not necessarily evident here, nor is it particularly desired. In fact without windows, we reduce the possibility of damage to the stock-the sun, windows left open overnight, pilferage, et cetera. The wall space used for windows can now be utilized for storage racks. Good artifical light can be made available in all the areas used. Whenever the system of shelving does prove wrongly spotted - it is a simple matter of screwdriver and wrench to haul it down and replace it elsewhere. The lights then are simply moved along their troughs and plugged in where they are needed. Metal shelving is attractive and economical because of its flexibility. The floor is of a smooth hardened finish. The air is fresh and kept at the proper temperature winter and summer. Summer cooling is not required here, but if the building is air conditioned, this area is not particularly difficult to temper. If there is no air conditioning in the building, then all that is necessary is an adequate exhaust and inductive system.

The floor is of necessity a structural floor — unless the hospital is in that utopian location where the soil is so stable as to provide a good compact base for a slab on grade. All too many chances are taken in the name of economy by placing a slab on compacted fill or

ground. The daily store room of the kitchen must be within easy reach

of the sorting and general storage areas. Also the meat, vegetable and dairy refrigerators are constructed in the immediate area for quick and easy transfer of goods. These units are usually built right into the building and are generally all

(concluded on page 102)

control of C.S.R. supplies

H. Heinsohn Winnipeg, Man.

through the Purchasing Department

ONE of the prime necessities for the efficient and economical purchase of medical supplies is a good working relationship between the central supply and the purchasing departments. Each must understand the problems of the other, meet half-way, and work together toward a common goal of good service to the hospital. If these three principles are not followed, many difficulties will arise.

Problem Situations Aware of the limitations of the budget, the purchasing agent wants to get the best buy on a product. He could get a discount if he bought in bulk, but suppose the nurse orders in lots of two or three. This same product is used for months, but still the nurse orders small quantities because she thinks this is economical and is not informed otherwise. At the same time the purchasing agent may order in bulk, on his own. Then the nurse places an order for a new and different product, and the purchasing

his hands. The lesson in this is that the purchasing agent must inform the nurse about the manipulation of stock, the supplies on hand and the proper method

agent is left with supplies of an obsolete product on

The author is central supply supervisor for the Misericor-dia General Hospital, Winnipeg, Man.

of ordering. She should also be acquainted with the availability of various products so that she will not expect the purchasing agent to perform miracles and obtain a certain item in the last ten minutes of the working day. At the same time she does not have to stock a 6-month supply if she disciplines herself to order with care and foresight.

An occasional survey of slow-moving products can be very informative to both departments. As an illustration of this, the hospital may be stocking a certain item for Doctor X, who was chief of surgery in 1959. Since then he has practised very little in the hospital, and his special item may have become so

much deadwood.

Another situation liable to create difficulties is one where the purchasing agent wishes to standardize his supplies of gauze sponges, but the operating room uses four types and sizes, the case room uses another three or four kinds, and the wards still another type and size. Consequently, the purchasing agent's shelves have become loaded with sponges of every size, shape, and type.

The solution? The purchasing agent should hold a conference with the various department heads, and invite a salesman to display the various sizes of one type available. In this way several sizes can be chosen and the same type used throughout the hos-

(concluded on page 84)

Florence Dyck Winnipeg, Man.

PHE special problems involved in the purchasing of medical supplies for the central supply room must be considered from two aspects. The central supply room deals not only with the purchasing agent, but also with those who are using the supplies. Thus it would seem that the economical and efficient flow of supplies into the hospital involves looking in two directions: (1) to the source — the purchasing agent; and (2) to the ultimate user - the wards and various departments. It is the second aspect which will be considered here - the relationships between the nursing staff and the central supply room.

The question is often asked, "How can we use medical supplies more efficiently and more economically?" The answer to this is - through stocking the ward, standardizing procedures, selection of new

equipment and servicing equipment.

1. Stocking the ward. It has been observed that some ward nurses stock almost everything that the C.S.R. does, whether they need it or not. (Perhaps On the Wards

they are secret competitors.) When this happens, the supplies are not being utilized to their full extent, but are left sitting idle on the shelves to collect dust. On the other hand, some nurses do not order enough of anything, and as a result they never have all that is required to run a ward smoothly. Consequently, their aides, orderlies, et cetera, run a beaten path to and from the C.S.R.

But generally speaking, the major problem is hoarding. Some nurses seem to have a fear of not being able to get what they want when they want it, and the result is that they order more than is necessary. The C.S.R. sees this tendency, and may cope with the problem in this way, for example, the ward nurse has ordered ten 2-c.c. syringes. The C.S.R. thinks she does not really need that number and gives her only five. If this happens several times, the nurse may decide that the only way to get the number she needs is to order twice as many, and so she asks for twenty 2-c.c. syringes instead of ten. This time, in filling the order the C.S.R. gives twenty and this results in over-stocking of supplies on the ward.

(continued on page 84)

The author is central supply supervisor for the Winnipeg Municipal Hospitals, Winnipeg, Man.

PERHAPS the most important factor governing the relationship between the salesmen and the purchasing agent can be summed up in a quotation from a national hospital magazine of a few years back: "Since the over-all welfare of the hospital patient is, in the last analysis, the primary objective of both the purchasing agent and his supplier, any factor which belittles the respective functions of either can jeopardize the progress of the hospital, and may possibly endanger the patient.'

A number of people, including some salesmen, are under the impression that the salesman has no other duty to perform except ask for an order and be a good fellow. Modern standards dictate otherwise, however, and today the salesman's first function is to help the purchasing agent or

administrator. Most salesmen are qualified to do this by the knowledge and experience they have gained over the years and/or training programs provided by reputable companies employing them.

The salesman should perform the following functions for the purchaser:

 Know his business and be prepared to help the purchaser by providing accurate information about his product.

2. Call regularly and conscientiously upon the purchaser and provide information about new items and techniques.

3. Provide technical service to the best of his ability on the product he sells.

4. Know the price of his product and advise the purchaser on how to buy to the best advantage.

5. Be ready and qualified to advise the purchaser on the quality and quantity of the product which will meet the requirements of his hospital.

Provide emergency service whenever a purchasing agent requests it.

7. Co-operate whole-heartedly in all respects with the purchasing agent or administrator. This function is the most important of all, and requires participation by both the purchaser and the supplier. Without co-operation and trust, a good business relationship is impossible, and purchasing becomes a game of cat and mouse between the two parties concerned. (The purchasing agent strives to reduce the profit to a point of no return on the items offered, and the salesman in turn tries to counter this by outwitting the agent at his own game, with the result that neither wins.)

8. Be a source of information about suppliers of items not readily available. If the medical staff requests a special instrument which is not available locally, and not listed in standard catalogues,

the

Supplier

as

Consultant

B. Dartnell Winnipeg, Man. the knowledgeable salesman can usually find a source of supply.

What is expected of the salesman's employer—the supply house? The answers to this are:

- Maintenance of adequate stocks of regular merchandise.
- Provision of credit if needed.
- 3. Maintenance of fair prices.
- Provision of technical service.
- Carrying out research on its products (if it is a manufacturing house).
- Above all, running an ethical business and assuming responsibility in the community.

The provision of adequate stocks of merchandise is

an important function of the supplier, particularly the expendable items which must be kept on hand for efficient daily operation. It does not matter how large

a hospital storeroom is; it cannot carry an adequate supply of all the things needed for any length of time. This is where the supplier comes into the picture. Every purchasing agent should feel that the stock of the supplier is provided to supplement his own. The supplier must, of course, be given a chance to know the hospital's requirements, and if he is successful, he will make it his business to have on hand at all times the necessary items. It must be remembered that the supplier is as close as the telephone.

Occasions sometimes arise when, for one reason or another, the hospital requires time payments or extended credit and, provided proper arrangements are made with the supplier, this service will be readily given.

The supplier should at all times provide the purchasing agent with fair prices, i.e. fair to the hospital, himself, and his employees. Profit should be adequate enough to provide for the operation of a sound business capable of maintaining its position in the community. On the other hand, profit must never be exorbitant. The purchaser should look beyond the asking price because it is not always the higher-priced item which carries the larger profit, and in the case of many imported items available today, the price is lower at the expense of quality, not a lower profit margin.

Product research, while it applies only to manufacturers, is extremely important to the hospital, since only by research can a manufacturer improve his product or discover new ones.

What is an ethical business? One which provides all of the foregoing services, plus adequate warehouse facilities, proper working conditions, and responsibility to customers for all transactions.

In summing up, while these are the functions expected from suppliers, they will only be available if they are encouraged by scientific and honest purchasing.

The author is sales manager, Stevens & Son Ltd., Winnipeg, Man.





BEFORE going into the subject of staffing patterns, let us examine the method of handling stores used in smaller hospitals today. In the realm of stores management, I think we will all agree that there is room for improvement in the staffing arrangement of stores departments in both small and large hospitals.

To offer a general appraisal on this subject, the stores management function in some of the smaller

hospitals may go something like this:

A man appears at the business office, thrusts a delivery slip listing, say six cartons and two drums, at whoever is handy and asks for a signature. As often as not the handiest person signs the slip and the delivery man disappears. If the person signing for such merchandise is "conscientious" he or she may ask the delivery man where the stores have been left and will thus learn that what amounts to several hundred dollars worth of stores has been left in the open corridor at the back of the hospital. Again in some places it is considered to be questioning the honesty of the delivery man to even ask, and the delivery slip is signed without the person signing having either seen the stores or even being aware of where they have been left, if indeed they have been left. The superlatively conscientious person may then go as far as to coerce the janitor into popping around to the back entrance to count the number of packages, put them into the storage room and note any readily apparent damage.

> F. D. Butler, Winnipeg, Man.

The six cartons and two drums, which we are using as an example, are now sitting in the stores and a member of the staff, who may be the director of nursing, the engineer, the typist, the housekeeper or indeed anyone who, through historic accident, has assumed the rôle of storekeeper, empties the cartons onto shelves and skids the drums into a corner. The contents of the cartons and drums may or may not be what was ordered either in quantity or quality, but the person unpacking them often assumes that since the consignment was signed for in bulk, it must be

To carry this analysis further, we next take a look at some stores distribution systems that exist in smaller and possibly even in larger hospitals. In some cases the word system is a misnomer, and free-for-all would be a more applicable term. There is no official supplies dispenser and the stores key is handed to any person within the hospital expressing the need for supplies with the instructions that they help themselves. This practice, believe it or not, is a staffing pattern for the distribution of stores and, gasp if you will, actually happens.

I think that the time spent running briefly over what passes for the staffing pattern of a department handling the tangibles of approximately 25 per cent of hospital funds is worthwhile in that it highlights the easy-going manner which sometimes prevails in stores handling and which is not recognized as such. From the above it can be seen that stores staffing arrangements can definitely be improved with no increase in costs.

The first step is to designate officially one person

The author is hospital consultant, Division of Hospital Standards, Manitoba Hospital Services Plan.

as storekeeper who is to be responsible for receiving, storing and dispensing all stores. If a hospital is of a size which requires more than one person to handle such a task then an assistant can be appointed, but with the clear understanding that the storekeeper is in charge and it is she or he who is responsible to the chief executive officer for the operation of the department.

Who should be chosen for the job? First a few

suggestions on who not to choose.

If you are the administrator or the director of nursing, do not take on the job. You have more than enough to do without burdening yourself with extra

Do not choose a member of the staff who can be easily intimidated—this position calls for someone who will be taking care of the equivalent of many thousands of dollars, and a certain amount of firmness is essential.

Do not choose a part-time or casual employee—this will inevitably lead to the splitting of responsibility

Stores Department

Staffing

between this person and some other member of the staff and will likely prove unsatisfactory.

Do not choose someone so ill-acquainted with hospital supplies that you are in constant doubt about the type and quality of stores which are being accepted.

Do not choose a member of the staff who is not available during the hours in which stores deliveries

and issues normally take place.

Do not choose the person who is doing the purchasing, since control is seriously weakened if the same person is responsible for both purchasing and stores control. No hospital is too small to divide these

two rôles between at least two people.

Three persons, any of which could be appointed, are the housekeeper, the maintenance man or a member of the office staff. In most small hospitals it is unlikely that more than an hour a day will be required for the storekeeping function and all of these staff members are usually in a position to pass along a little regular work to a fellow employee. If, of course, other suitable people are available there is no reason why one of them should not assume the position.

The Set-up of the Department

To lighten the storekeeper's load, arrangements can be made with the local transfer company to deliver stores to the hospital once a day rather than every time they pass by the hospital. It may also be advisable to request that no stores deliveries be made after, say 4.30 p.m., since this often causes a last minute scramble and goods are inadequately checked. In this manner the storekeeper, who will in most cases have other hospital duties to perform, will be called away from regular duties once a day only. At this time he or she should check the newly received stores in bulk, sign for them and note on the delivery slip any apparent damage. A separate notice of receipt of stores should then be written for each consignment which will later be filled out with the contents of the packages. This will be done at the time the stores are unpacked and checked. A receiving ledger in which bulk receipts are noted is also a handy check, should there be doubt later about what has actually been received.

Following through our procedure, the stores are next moved from the receiving area to the central stores and whilst the delivery man will sometimes perform this task he is not obligated to do so. If he declines, a male member of the staff should move at least the heavy items to the central stores without delay where they will be under lock and key.

To elaborate a little on the subject of a locked central stores, I would stress that it is grossly unfair to hold the storekeeper responsible for the safe-keeping of stores unless such a facility is provided. I know that some of the hospitals have no central storage room at all, let alone a locked central stores room and this can be an almost insurmountable obstacle effective staffing and stores control. Such hospitals should plan for adequate storage space when any future expansion or renovation projects are contemplated. Twenty square feet of general storage space per bed has been outlined as adequate by the Federal Hospital Design Division.

If the stores just received are of a type which can be safely shelfstored, the storekeeper should now, not later, unpack and check them carefully against the packing slip and place them on the shelves. I should mention that the storekeeper will probably spend most of his time unpacking, checking and documenting the stores and adequate time allowance should be made for this purpose. Regardless of the fact that these procedures are taking the time of a valuable member of the staff, do not be tempted to have storekeeper delegate

portion of the job to someone else other than have maybe someone assist in his presence. This makes only one person responsible for the contents in the central stores.

Stores Requisitioning and Distribution

The same person who received, checked and stored the supplies should be in charge of distribution. It is of little avail for the store-keeper to meticulously ensure that the hospital has been protected against inferior quality and shortages and then to have supplies wasted by misuse or overuse through reckless or uncontrolled distribution.

For successful control of stores, supplies should be issued only upon presentation of a duly authorized, detailed supplies requisition slip, regardless of how large or small the hospital is.

How often should supplies be issued? While each hospital will, of course, have to make its own decision, taking into consideration the subsidiary storage space available, my own opinion is that, for most departments, a once weekly stores issue is quite adequate, always taking into consideration the

is Purchasing a Profession?

Is purchasing a profession? I submit that in its present state it is not, but it could be.

Professional standing is generally accorded to members of certain associations which have a rigid set of standards for the examination of those who seek entry into their membership. Usually, to meet these standards one must expose oneself to extra education, thought and responsibility. Generally, such associations govern the activities of medical and dental doctors, architects, lawyers, chartered accountants, et cetera. Other groups of people engaged in such fields as teaching and optometry are actively campaigning to gain control of those who would enter their membership, to set standards for them and thus to attain professional status. Many of these organizations have this as a specific aim. They work hard toward its attainment and will doubtless some day achieve it. Others, among them H. D. Knox Winnipeg, Man.

purchasing agents, would like to be considered as professional people, but they are more content to talk about it than work toward it, and so their status changes very slowly.

One of the principal objections heard when one beats the drums of publicity to gain recognition in the purchasing field is the statement, "Purchasing, hah! What is so special about that? Anyone can spend money. Anoyone can buy."

There is no point in attacking this thesis. It is well known that men and women of widely differing backgrounds and personalities have been notably successful in the purchasing field. There is no standard pattern for success. There have also been men and women tossed into positions of responsibility without specific preparation. These examples tend to

support the contention that anyone can buy, but it must be emphasized that the significant part of the achievement of these people does not lie in their personal accomplishment. It lies rather in the fact that so many have made purchasing a science instead of treating it as just another job. It is not enough that purchasing agents produce a 100 per cent procurement performance. Management looks to them for creative and executive performance. Leadership in purchasing can demonstrate ability to cope with responsibility. Every new accomplishment adds a little to what management can expect, and every such enlargement adds a new qualification to the concept of competent purchasing. It is to these qualifications that attention must be drawn if purchasing is to attain professional status.

ANYONE CAN BUY IF he knows how to judge value. It is not enough to buy a product at the





type of stores involved. Keep in mind that the storekeeper will have to be in personal attendance at the central stores during each stores

issuing period.

The number of persons authorizing a supply requisition should be kept to a minimum, since the more people granted this privilege, the less effective the control. What should such a person check before appending his signature on a requisition? The first thing to recognize is the human frailty of wishing to avoid deprivation and desiring for abundance. This will be reflected in a tendency to requisition supplies in excess of what is likely to be used. A second point is that some items will be written into this week's requisition for no better reason than that they were requisitioned last week. Needless to say this can be a very unsatisfactory basis for re-requisitioning supplies. Do not, of course, be penny-pinching in your appraisal of supplies requisitions, but on the other hand do not condone or encourage waste either.

Proper recording of stores received, sorted and distributed along with proper staffing arrangements comprise the essentials of good stores accounting practice. It will enable you to process the accounts payable with a reasonable degree of certainty, showing that you have actually received the supplies for which you are paying. In addition, if at any time you wish to introduce a perpetual inventory, the essential ingredients have been prepared concurrently. This information will also enable the establishment of an average rate of consumption of any or all supplies.

Dietary Stores and Staffing Arrangements

In the deitary department there will be a series of deliveries-milk, bread, meat, et cetera-all arriving at different times and requiring checking and storing. It would be quite unreasonable to expect the storekeeper to receive and check these sporadic deliveries. The logical choice for this job is the head of the dietary department who is well acquainted with the quality of foodstuffs expected by the hospital and who should reject unsuitable supplies on the spot. The head dietitian thus enters into the staffing of the stores department even though the supplies in question are not, in this case, passing through

the central stores. To enable her to perform this task properly, the following should be insisted upon:

1. Each supplier should be requested to render a detailed delivery slip with each delivery of supplies.

2. It should be made clear to each supplier that frozen or chilled foodstuffs should be in that state when delivered.

3. All meats delivered to the hospital should have been inspected by either a government agancy or a veterinarian, and should bear the appropriate stamp. Only by insisting upon this feature can the hospital be assured of receiving what it is paying for and more important still, it is protected from possible sources of illness.

4. Dairy products should be purchased only from governmentlicensed dairies which provide the equivalent protection of inspected

meat plants.

5. Similar quality control measures should also apply to vegetables and other perishable food-

Immediately following delivery and checking of perishable foodstuffs, the head dietitian will have

(concluded on page 102)

lowest price possible. When just anyone is doing the buying, awarding the business to the lowest bidder is usually the end of the process. The good purchasing agent can analyze whether the low bid is in fact the most economical to his institution. With his knowledge of what the product is to be used for, he can weigh and measure whether a specification is too good, or too poor, whether delivery specifications are too rigid or too loose. He can judge the purchase from many angles. Inadequate specifications can waste more money than one realizes until the situation is studied closely.

ANYONE CAN BUY IF he knows where to get the goods. It is not sufficient that the purchasing agent sit back and place orders with only those people who come to call on him. He must find out all the places which might be able to provide the product he wants. Does he endeavour to interest new people in the needs of his institution? This kind of research is best followed by visits to plants and factories in the area. Does he study

the potential of those around him, and does he know what they can give him if they are shown how this would benefit them? For example, one large company engaged in the manufacture of fire-fighting equipment also manufactures parts for mouse-traps. Somewhere along the line someone saw the potential of the copper and brass trimming that was a by-product of the basic factory production.

ANYONE CAN BUY IF he knows how and why the things he buys are used in his institution. This knowledge is what gives meaning to what the purchasing agent does. Without it his job becomes automatic and eventually boring. How can he intelligently recommend an alternative if he has no idea what he is trying to procure? Before he begins any action, he should find out what he is supposed to obtain. What does it look like? What is it used for? What is it made of, and what result is expected from it?

ANYONE CAN BUY IF he knows the legal responsibilities involved in each purchase. What does the purchasing agent involve himself

in when he signs as an agent for his firm or institution? Does he carefully read all the small print on a contract before signing it? Do his actions always conform to the regulation set by his board of governors or by statute of the provincial or federal government? Ignorance of these regulations and statutes is no excuse for breaking them, or for allowing anyone else to break them.

ANYONE CAN BUY IF he knows how to get along with people. The mechanics and science of purchasing demand from the agent a personal touch in his treatment of salesmen, his relationships with his staff, the way he presents proposals to the other heads of departments and elicits co-operation. His ability to deal with people may spell the difference between a mediocre and superlative purchasing performance. Many a good program of purchasing procedure has been sabotaged in the receiving room, or in another department, or in the purchasing agent's office, because of his failure in human

(concluded on page 144)

TOTAL PATIENT CARE



at Peterborough Civic Hospital

John MacKay Peterborough, Ont.

THE development of plans and subsequent building and renovating of the Peterborough Civic Hospital was geared to a consultant's survey and a desire to provide a complete hospital facility for a typical Ontario community.

The city of Peterborough (Ont.) and its hospital facilities were surveyed by the firm of Agnew, Peckham and Associates during the year of 1956. The terms of reference included an analysis of the then existing facilities and their adequacy; a study of community needs and recommendations to meet these needs; and integration of projected needs with existing facilities. The survey report indicated desirable priorities in the expansion program and finally outlined a master plan for future expansion.

The firm of consultants did a noteworthy piece of work and made definite recommendations. These included expanding the paediatric, medical and surgical departments; the building of a chronic unit with adequate rehabilitation facilities, and possibly an intensive care unit so as to provide the necessary steps toward progressive patient care. The consultants made various minor recommendations dealing with ancillary departments, all of which have been implemented.

The firm of Craig and Zeidler, Architects, was commissioned. They worked with the recommendations in mind to meet the present needs and project them into the future. Out of this came a plan for building-unique in its desire to meet community needs, unique in its financing in that no public appeal was made for funds. Possibly we should mention the second point first. The additions to and the renovation of the Peterborough Civic Hospital have been paid for by generous grants from the provincial and federal governments, and a debenture issue from the city of Peterborough. The debenture issue of close to a million dollars, is being repaid out of semiand private room differentials, and if the first year is any criterion, we have no reason to believe that this is not possible. This we feel spreads the cost of the building over a fairly complete segment of the public who have the ability to pay.

The building itself resulted in a net gain of 130 beds. This addition to a 240-bed hospital with all of its facilities bulging meant a reallocation, rebuilding, and renovating of many departments. Suffice to say that the laboratory expanded from 1,420 to 3,420 square feet; the physiotherapy department from 610 to 3,360 square feet; the central supply department from 750 to 1,880 square feet and others in much the same proportions. These increases were planned not only to accommodate additional patients, but also to provide for an increasing demand on hospital diagnostic and treatment facilities.

The actual new building program went beyond the early recommendations of the consultants. Progressive patient care is now an accepted concept. Here in Peterborough we have provided for intensive care, intermediate care. convalescent care, and two types of long-term care - rehabilitative and the more typical chronic. Furthermore, we included an inpatient psychiatric unit which we felt was greatly needed in the community. The demand has proven the point. It might be noted also, that one floor was left unfinished to be completed later when need arose.

Original Building

The original building which now houses a large new dish-washing room and an expanded cafeteria, was less than ten years old when new construction started. Our admitting office and emergency department, which includes a new recovery room, have been enlarged so as to provide complete service. Peterborough is the centre of a large tourist vacation area and our visitors are prone to minor accidents. We are now well prepared to care for them. The business office, doctors' library, medical records department, and board room, all underwent major changes. The operating rooms were added to and renovated. A new recovery room replaced a much smaller one which

The author is superintendent of Peterborough Civic Hospital.

now reverts to its original design as a major operating theatre. In order to accomplish much of this renovation, our contractor worked around the clock and we never lost a day in carrying forward normal procedures.

Hutchison Wing

In the Hutchison Wing we have added, primarily, new departments, and transferred to more adequate quarters some of the old ones. This wing is connected to the original building by a glass enclosed connector corridor, which dramatically separates the old from the new. The original building is faced with red brick and stone — the new with white glazed brick and pre-cast quartz imbedded concrete panels. There is no doubt that an addition has been made to the Peterborough Civic Hospital; when one views it for the first time.

The wing comprises five floors, the top floor to be completed in the future. On the ground floor, which coincides with the basement of the original building, but which is provided with adequate windows, we have our physical and occupational therapy departments and our psychiatric shock treatment area, as well as offices for the psychiatric treatment team. These offices connect directly by stairs to the inpatient psychiatric care unit. The physical and occupational therapy departments have an exterior entrance to our rather spacious grounds where patients may be taken out in the sun or to participate in outside games, such as croquet and horse-shoes. As I men-

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tioned previously we are concerned with complete patient care and these activities are essential for rehabilitative and psychiatric patients.

Psychiatry The first floor houses our 26-bed in-patient psychiatric unit. This area is divided into two and fourbed rooms, a large tastefully decorated and furnished common room, smaller reading rooms, a group conference area and a supervisors' office. This unit, in which no patient is restrained by physical means is regarded as a very necessary part of our acute general hospital and as such patients are cared for on the same basis. They are free to come and go, work and play as any other group of patients. The director, a certified psychiatrist, is endeavouring to gain community and "hospital" acceptance of this concept and I believe his results will prove that his methods bear copying. Although the original plans called for two single-bed maximum security observation rooms, these have never been used for that purpose and the Depart-ment of Health has not issued a certificate enabling the hospital to use locked rooms. The concept of an open psychiatric ward, integrated fully with the rest of the

hospital, is one of our prime ob-**Paediatrics**

The second floor of this wing houses a 41-patient paediatric unit. At both ends of the unit are situated two two-bed isolation units complete with their own sub-sterile areas. These two units were placed at opposite ends so that, if necessary, ordinary care could be expanded into either one, depending on the age groups of the children. This provides for maximum flexibility. All patient rooms have glass panels in corridor walls and doors so that the patients are always in view to the nurse in the corridor. The isolation rooms are installed with a two-way intercommunication system so that a parent in the corridor may view and talk to a child without entering the room. An audio-visual nurse-call system was installed here as in all patient areas in this wing. An innovation, which was regarded by some as a luxury, is the children's play-room, complete with child-size furniture, toys and a large television set. Its value has been proven each and every day as youngsters, who are convalescing or who are awaiting elective surgery, while away the hours in rapt attention to the T.V. screen - a built-in nurse and baby-sitter with a purpose. Here again the architects ingeniously decorated one wall with wood panelling, to get away from typical hospital interior.

Long-term Care

The third and fourth floors of this building provide accommodation for convalescent, rehabilitation and long-term chronic cases. The rooms are mostly four-bed, however there are a few semi-private and one-bed rooms for those patients whose condition warrants them being in a room by themselves. A large comfortably furnished sitting-room with an L-shaped dining area provides a home-like atmosphere for those individuals



iectives.



Doctors library and committee room.



who are able to make use of it. Here we see the trend to self-care and the benefits of a well organized rehabilitation program. The cooperative well-integrated team effort of nurses, orderlies, occupational and physical therapists, under the guidance of well trained and interested physicians, has brought about a relatively high turn-over of patients in the long-term section. Moreover the introduction of such service has tended to lower the average stay of patients in the normal care accommodation.

Innovations

Some of the features of this new wing which we feel are of value to treatment and more efficient patient care include the introduction of a pneumatic tube system to both the original building and the new wing. At the time it was being installed we wondered if all the noise and dirt would

of the two new theatres, we installed a combination, track-mounted, lighting and radiographic unit which facilitates taking x-rays while the patient is undergoing surgery. With so much equipment and so many people in operating rooms, the ability to place x-ray equipment up off the floor should be of tremendous benefit in carrying out certain procedures.

Earlier, it was mentioned that we had expanded our dish-washing area and cafeteria. I would be remiss if I did not mention that we now use two types of food service. The original building uses a conventional trayveyor system whereas in the new wing we use a modification. The trays are removed from the food service line prior to being conveyed to the floors and placed in hot and cold food trucks. This was developed not only because of the distance, but also because of the variety of patients being served

date these might be required for active care (at which time a separate long-term building would be erected) considerable thought had to be given to the present construction. With this in mind, the planners provided acoustic fibre glass ceiling panels throughout the wing that can be removed at any place at any time without damage to the panels. All patient room partitions are of metal studd and plaster lath construction so that they can be broken into at any point and such services as are required may be installed. The above gives a very simple example of forward planning without adding to cost

Complete Service

At the outset it was mentioned that this hospital was planned for complete service to the community. Possibly before concluding this article it might be of interest to outline the areas which appear to satisfy this requirement.

Upon entering the Peterborough Civic Hospital one encounters an admitting office and emergency department. Directly across the corridor is a nurses' station attended by a graduate nurse. She is in charge of the emergency operating room, a smaller examination and treatment room and a seven-bed emergency recovery room designed to care for short stay surgical patients and small local disasters. On the same floor we find a 19-bed intensive care unit. This unit in some respects is an extension of the emergency department in that seriously injured accident victims are transferred here immediately upon arrival; the more critical surgical and medical patients are also cared for here. Some are admitted directly and others transferred from the medical and surgical floors. It is interesting to note that medical and surgical, males and females, young and old are treated side by side and as yet we have had no complaints. The criteria for admission are purely medical and nursing needs. The staff are highly trained; life saving equipment and drugs are readily available and used strictly for those requiring them.

As we travel up through the building we encounter intermediate or normal care patient floors. The one unusual aspect is an isolation unit on the medical floor which can be expanded from a one-bed room to the maximum of nine beds. When this area is not required for

(concluded on page 148)

The new laboratory.



ever be compensated for. However, the results have been outstanding.

The air-conditioning system with humidity control, employing a lithium chloride solution spray, in the operating theatres and delivery rooms is another innovation about which we are most satisfied. This system provides controlled temperature, humidity, and practically bacteria-free air to these areas. Although our incidence of infection was very low before we installed this equipment, we believed that any additional steps we could take to safeguard our patients were both requisite and necessary. Before we leave the operating area, I would like to mention that, in one

in the new wing. In the psychiatric unit practically all of the patients eat in a common dining room, and on the long-term and rehabilitation floors we also see many patients enjoying meals in dining areas rather than in bed. There is little doubt that this is much more enjoyable and certainly aids in the treatment of these individuals.

One or two features in the construction of the building which are so important to efficient operation and maintenance (and which have been included) indicate the thinking and research done by the architects. In view of the fact that two complete floors are devoted to long-term care and that at some future



SAFER... Sterilization is reduced to a mathematical certainty. Maximum removal of air with full steam penetration is assured. There can be no doubt!

HIGHER CAPACITY... Sterilizers may be loaded to full capacity... an increase of about 25% for every existing dry goods sterilizer.

HIGHER SPEED... Typical dry goods cycle is just 15-20 minutes from start to finish. Compare this with the 60-to-120 minute cycles now in use.

Exclusive console design permits conversion of most existing field sterilizers . . . protects your investment by extending the usefulness of present equipment.

HIGHER TEMPERATURE... Fast-killing temperatures up to 275° F. can be

used routinely for fabric sterilization, with less deterioration than by conventional methods.

LONGER LIFE... Shorter exposure to higher temperatures means that sterilized goods last longer... you save on replacement costs.

wider application... Air evacuation is so efficient, the cycle so shortened, that it now becomes routine procedure to process many items formerly difficult or impossible to sterilize in steam.

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The Future

of Dietary Service in Manitoba

RECENTLY I was asked the question, "What is the future of the dietary service in hospitals under hospital insurance?" This could be answered with one word-"bright". However, it seems important and necessary to relate it to my own experience as a member of the team of the Hospital Standards Division, Manitoba Hospital Services Plan.

First of all, what is the Division of Hospital Standards and what are its terms of reference? Secondly, what have we accomplished and what do we hope to accomplish in the Division? I shall relate these specifically to the dietary area.

The Federal Health Insurance and Diagnostic Act requires that any scheme for the administration of a provincial law shall include:

(a) Arrangements for licensing, inspection and supervision of hospitals.

(b) Arrangements to ensure the maintenance of adequate and proper standards.

Further, the Hospitals' Act of Manitoba has required, ever since the province entered the Hospital Insurance Plan in 1958, that all hospitals in Manitoba be licensed. However, until the establishment of guide lines or some basis of measuring or judging what are desired standards for hospital

This article is based on (a) a paper presented at the Institute on Dietary

Isabel MacArthur, R.D., B.Se. (H.Ec.), M.A., Ed.D. Winnipeg, Man.

operation, it has not been possible to carry out the letter of the law.

Therefore, in June 1959, the Division of Hospital Standards was created. In November 1959 it was made an integral part of the Manitoba Hospital Services Plan. The Plan is one of three different departments which are responsible to the Minister of Health and Public Welfare. The present Hon. Minister is the Johnson, M.D., who was a practising rural physician. He provides us with a sympathetic ear in our joint aim to raise the standards of hospitals in rural Manitoba. Some people feel that the Standards Division should be separate from the financing body and in some provinces it is. In Manitoba we think it has been most helpful to have this close association so as to learn quickly the reasons behind an answer of "No".

The director of Hospital Standards, Dr. C. G. Wood, through the Commissioner of Hospitalization, Gordon L. Pickering, is responsible for encouraging and assisting hospitals in Manitoba to provide adequate standards of service to the residents of the province. The director has a staff

of consultants well qualified in the techniques of administration, dietetics, laboratory and x-ray, medical records, nursing and pharmacy, to assist him in achieving the Division's aim which is the improvement of patient care in the hospitals of Manitoba.

What are the terms of reference of our Division of Hospital Standards? It is responsible for carrying out the following:

1. To recommend standards for hospital plant and organization, including medical staff organization and performance.

2. To inspect and record the standards achieved by individual hospitals regularly and at such other times as may be indicated.

3. To recommend on:

(a) the requirements for new facilities and the expansion and improvement of existing facilities including the necessary construction and renovation programs in respect thereto:

(b) the adequacy of plans proposed for construction and renova-

tion programs;

(c) the estimated grant entitlement in respect to construction and renovation programs.

4. To provide a consulting service to hospitals of the province in all fields of hospital operation, exclusive of professional care of individual patients.

5. In respect to education:

- (a) to participate in programs already established in the hospital field;
- (b) in areas where such programs do not exist to recommend their establishment, and to institute such programs as may be authorized.
 - (c) to issue such publications

ervice Administration sponsored by the Quebec Hospital Association in December 1960, Montreal, Que., and (b) a joint paper presented with Miss M. I. Campbell at the January 1961 meeting of the Dietetic Association of Manitches.

Manitoba.

The author is a food service specialist with the Division of Hospital Standards, Manitoba Hospital Services Plan.

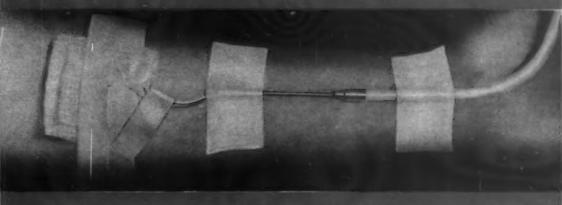
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as may be necessary to assist the Division in achieving its objectives.

6. To assess personnel needs to enable hospitals to meet established standards, and where shortages exist, to recommend ways and means of providing the additional staff required.

7. To participate in research and survey activities of the Manitoba Hospital Services Plan where indi-

cated.

8. To carry out such other activities as may be assigned from time to time by the Commissioner.

This staff has spent a considerable time preparing standards for hospital licensure. Each consultant took part in this primary function so that he would have knowledge of the standards established for all hospital areas. This made it possible for each one to review all phases of hospital activities as visits are made to all the smaller hospitals in rural areas. If, during a visit, a problem is presented with which the consultant cannot deal, it is referred to the appropriate person.

In order that the standards will be acceptable to those who have to work under them, a draft form is being circulated to many official organizations in the hospital field, e.g., Manitoba Medical Association, Associated Hospitals of Manitoba, Catholic Hospital Conference of Manitoba, Manitoba Associated Registered Nurses, Dietetic Association of Manitoba, et cetera, for study, review and suggested changes. Eventually the standards will be issued as Regulations under the Hospitals' Act. As far as hospital personnel are concerned, in no case shall persons holding appointments in hospitals at the time of issue be debarred from continuing to hold these positions as a result of the requirements contained in these Regulations.

Whatever standards are established must be applicable to all sizes and types of hospitals. Thus a single "standard" is impossible. Too often people judge hospital standards according to size rather than quality. For the purpose of licensing, it is proposed that all hospitals in Manitoba will be divided into groups indicating the degree of comprehensiveness with which they carry out the functions of a hospital.

Proposed Dietary Standards

1. General

Every hospital shall maintain a dietary department.

2. Supervision

(a) In Group "A" hospitals (this refers to the proposed classification of hospitals for licensing) the dietary departments shall be under the direction of a registered dietitian who is a Home Economics or Household Science graduate of a recognized university or college. She shall hold a Bachelor's Degree, having majored in Dietetics or Institutional Management in a course which meets the requirements for membership in the Canadian Dietetic Association. She shall also have completed directed post-graduate study or its equivalent as specified by the Canadian Dietetic Association and shall have had varied experience in hospital dietetics.

(b) In all other hospitals the dietary department shall be under the direction of either a food service supervisor or a head cook, who shall have had experience and possesses skill in the operation of a quantity food service. The preparation of modified diets shall be under the supervision of the director of nursing.

3. Staffing Requirements

There shall be one registered dietitian for every 100 beds or major portion thereof and sufficient other staff to ensure an efficient and satisfactory food service.

4. Physical Facilities

The dietary department shall provide facilities and floor areas as indicated by the Hospital Design Division of the Department of National Health and Welfare, except that the choice of either centralized or decentralized food service shall be optional. Adequate office facilities shall be provided for dietary supervisory staff and such facilities shall be located either in, or adjacent to, the dietary department. Storage space for the daily requirement of dry foods shall be provided and located adjacent to the dietary department.

All physical facilities are to comply with existing legislation which deals with refrigeration; lighting — an intensity of light equal to at least 20 foot candles on working surfaces at a distance of 30 inches from the floor, and in storage and refrigeration areas at least five foot candles; ventilation where necessary all cooking areas shall be provided with hoods together with ventilating shaft, or other suitable devices to carry off all smoke, steam or odours and shall be so constructed and maintained as to work efficiently under all weather conditions; dishwashing; sanitation; and the storage and distribution of food.

5. Equipment

The minimum equipment for a kitchen shall be as laid down by the Minister from time to time.

6. Records

Dietary records shall be maintained, which will minimally provide all information required for the Dominion Bureau of Statistics Annual Report, and the Manitoba Hospital Services Plan budget reports. Menus, as served, shall be kept on file in the dietary department for a minimum of six months.

7. Policies

(a) Menus shall be prepared one week in advance and shall meet the basic Canada's Food Guide as established by the Nutrition Division of the Department of National Health and Welfare.

(b) Accepted methods of food

preparation shall be used.

(c) If more than 12 hours elapse between the regular last meal of the day and the first meal of the following day, evening nourishment shall be served.

(d) A system shall be maintained whereby the dietary department is kept informed of food re-

quirements.

(e) All milk and milk products shall have been pasteurized in a plant possessing a current Minister's Certificate of Approval.

(f) All meat and poultry shall have been either purchased through a government-inspected plant or inspected by a qualified veterinarian

(g) Where the local sanitary code does not provide for the regular physical examinations of food handlers, the hospital shall require such examinations at the termination of any illness and at monthly intervals to ensure freedom from infection. A record of such examinations shall be maintained.

From these proposed standards you can see that it is our desire to strengthen the dietary service of the hospitals in Manitoba under hospital insurance. It cannot be accomplished overnight — not even in a year or two. Consequently, a long range program is being developed.

Our main concern is to strengthen the smaller rural hospitals which, because of location or shortage of available personnel, do not have an efficient dietary department. The dietary or food service

(continued on page 162)

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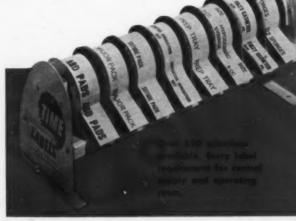
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Werner F. O. Daechsel.

The A.C.H.A. holds its annual convocation





Sr. Rose Marie Prieur.

American College of Hospital Administrators held its 27th annual convocation ceremony on September 24 in Atlantic City, N.J.

Canadians honoured at the ceremony are listed below:

Fellows

Werner F. O. Daechsel, superintendent, The Belleville General Hospital, Belleville, Ont.

Sr. Mary Ruth, superintendent and administrator, St. Joseph's Hospital, Saint John, N.B.

Members

Sr. Gladys Rideout, administrator, Hôtel Dieu of St. Joseph, Chatham, N.B.

Sr. Lorraine Godin, administrator, Hôtel Dieu of St. Joseph, Perth, N.B.

Sr. Mary Fabian, administrator, St. Clare's Mercy Hospital, St. John's, Nfld.

Melanie, admin-Sr. Mary strator, St. Mary's M Hospital, Montreal, Que.

Kenneth S. McLaren, administrator, Cornwall General Hospital, Cornwall, Ont.

J. K. Morrison, M.D., medical administrator, Sunnybrook Hospital, Toronto, Ont.

C. A. Roberts, M.D., medical superintendent, Verdun Protestant Hospital, Verdun, Que.

Elmer W. Roeder, admini-strator, York County Hospital Corporation, Newmarket, Ont.

Sr. Rose Marie Prieur, assistant administrator, Hôtel Dieu of St. Joseph Hospital, Windsor, Ont.

Hugh F. Ross assistant administrator, The St. Catharines General Hospital, St. Catharines, Ont.

George C. Sherwood, business administrator, University Alberta Hospital, Edmonton, Alta. Peter Smith, administrator,

Woodstock

Woodstock Ont.

Bernard Snell, M.D., medical
University of
Alta. Alberta Hospital, Edmonton, Alta.

Peter E. Swerhone, assistant administrator, Winnipeg General Hospital, Winnipeg, Man.

D. Dickson Thornton, admini-strator, Port Colborne General Hospital, Port Colborne, Ont.

George E. Thornton, admini-strator, The Wellesley Hospital, Toronto, Ont.

Nominees

Sr. Aline Leblanc, assistant Hôtel-Dieu administrator, Saint-Joseph, Edmundston, N.B. Sydney G. Anderson, assistant

director, Ottawa Civic Hospital, Ottawa.

Sr. Ann Ell, superintendent of administration, St Boniface Sanatorium, St. Vital, Man.



Sr. Lorraine Godin.



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Jeannie Archibald, assistant administrator, Shriners Hospital for Crippled Children, Winnipeg, Man.

Col. J. W. B. Barr, M.D., assistant surgeon-general (personnel), Department of National Defence, Ottawa.

Peter M. Breel, administrator, Alexandra Hospital, Ingersoll, Ont.

Robert J. Cameron, admini-strator, Kirkland and District Hospital, Kirkland Lake, Ont.

Peter R. Carruthers, assistant administrator, Kingston General

Hospital, Kingston, Ont. Sr. M. DePaul, bursar, St. Joseph's Hospital, Saint John,

Donald P. Fish, executive assistant (administration), Ottawa Civic Hospital, Ottawa.

Irial Gogan, M.D., medical director, Holy Cross Hospital, Calgary, Alta.

Sr. Helen Levasseur, administrator, St. Joseph's General Hospital, Vegreville, Alta. Peter Hodge, administrator,

Maple Ridge Hospital, Haney, B.C.

Anthony W. Kaytor, administrator, North York Branson Hospital, Willowdale, Ont. Sr. M. Loretto, administrator, St. Vincent's Hospital, Vancouver,

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Sr. Margaret Marie, administrator, Holy Family Hospital, Prince Albert, Sask.

Sr. Maria Loyola, administrator, St. Martha's Hospital, Antigonish, N.S.

Sr. Marie-de-la-Paix, superintendent, Hôtel-Dieu du Sacré-Coeur de Jésus, Dolbeau, Que.

Sr. Marie-de-la-Trinité, Hôtel Dieu du Christ-Roi, Alma, Que.

Sr. Marie Joseph, administrative assistant, Ottawa General Hospital, Ottawa.



George E. Thornton.

Sr. Marie Marthe, Hôtel-Dieu de Saint-Joseph, Edmundston, N.B.

Sr. Mary Louisa, Hôtel Dieu Hospital, St. Catharines, Ont.

Sr. Mary Stanislaus, administrator, Charlottetown Hospital, Charlottetown, P.E.I.

Ralph D. McGugan, administrator, Greater Niagara General Hospital, Niagara Falls, Ont.

Robert J. Nodwell, M.D., medical director, The Toronto Western Hospital, Toronto, Ont.

Sr. Patricia Ann, administrator, St. Paul's Hospital, Vancouver, B.C.

Donald A. Robertson, administrator, Kitimat General Hospital, Kitimat, B.C.

A. George Rodgers, administrator, Rest Haven Hospital, Sidney, B.C.

Victor F. Simpson, assistant administrator, Reddy Memorial Hospital, Montreal, Que.

Ronald Slater, superintendent, Parry Sound General Hospital, Parry Sound, Ont.



Sr. Mary Fabian.



Kenneth S. McLaren.

Sr. Veronica Callaghan, administrator, Hôtel Dieu Hospital, Cornwall, Ont.

Cornwall, Ont. Sr. M. Vianney, administrator, St. Joseph's General Hospital, Comox, B.C.

Sr. Yves de Jésus, director of nursing, Hôpital Saint-François d'Assise, Quebec City, Que. ■

Changes in Saskatchewan's Public Assistance Program

A needs-test will replace the means-test as a measure of eligibility under two of Saskatchewan's public assistance programs — Supplemental Allowance and Mothers' Allowance. The changes indicate an increase in total allowances of over \$2 million annually.

The change in Supplemental Allowance paid to needy persons receiving Old Age Security pension and to recipients of Blind Persons' Allowance will be made in November. Changes to the Mothers' Allowance program took place in July and the program was renamed Aid to Dependent Families.

Under the previous system, Supplemental and Mothers' Allowance programs were paid entirely by the province. With the introduction of the changes, the program is shared by federal and provincial governments under the Employment Assistance Acts. The cost sharing arrangement for Supplemental Allowance will be on a 50-50 basis. Aid to Dependent Families expenditures is shared in part by the federal government.

Converting to a needs-test basis means these programs will, in effect, become social aid. However, because of the extensive health benefits given recipients and their dependents by the province, the programs will continue to be administered provincially.

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Paper Dining Service —



in a contingency

IN the course of its long-term construction program, the Toronto Western Hospital, which now accommodates some 675 patients, found it necessary to provide new and up-to-date kitchen facilities. The space assigned is in the ground floor of the interns' residence which is immediately adjacent to the main building. (See Canadian Hospital May, 1960, page 50.)

Now moving from one kitchen area to another, and serving meals to patients without fail, posed many problems; and the chief of these arose from the fact that the 21-foot automatic dishwasher had to be overhauled and re-assembled. The period involved was two and a half weeks and much study went into the question of how to get along without the dishwasher. Fortunately, the dishwasher in the cafeteria was large enough to handle dishes for all private patients and so only those on the standard wards (some 337) were involved. Paper service turned out to be a happy solution.

Many people were involved in planning for this move—engineers, architects, administrative and purchasing staff, and of course, dietitians. Long beforehand it was known on which day each piece of heavy equipment would be moved. Menus were planned in accordance with whatever equipment would be left in the old kitchen on each day and what paper service would be needed that day. The problem of storing large supplies of paper dishes was alleviated through the co-operation of the

local manufacturer, Frequent deliveries of the exact quantities required arrived promptly and on schedule.

For the paper service, it was decided that seven items were essential: 9" plastic-coated plates for hot meals; 6" uncoated plates; 7 oz. coated hot cups for coffee; 9 oz. cold cups for milk, iced beverages, et cetera; 5 oz. cold cups for water or vegetable juices; 8 oz. soup containers with lids; 5 oz. ice cream



Please pardon the inconvenience...

In order that we may properly provide you with good food and the best in service, The Toronto Western Hospital has built an entirely new kitchen and is proceeding to move into it.

We pride ourselves in the quality of our food and the manner in which it is served, so please do not judge us too harshly if both are not up to our usual standard during the next few days.

During this period, while we are moving from the old into the new, we are likely to encounter problems in both preparing your food and serving it to you.

We apologize in advance for any inconvenience you may experience and hope that you will bear with us. containers with lids; plus creamers for coffee and portion cups in two sizes for jams or mayonnaise, vegetables or salad.

The unit cost to the hospital was found to be less than .01c per paper product per tray, including inbetween nourishments.

A design was chosen which had special eye-appeal and patients were oriented in advance (see illustration). These cards were placed on patients' trays and on those of each person admitted during the moving period. As a result patients accepted the paper service with good humour and lack of complaint.

And there was actually little to complain about. In the ordinary way, it takes 20 minutes to transport food from the tray preparation area to the patient and this time was maintained. Although the plastic coated plates could not be preheated, the insertion of a heated "pineapple" ring, and using the stainless steel cover, helped to retain most of the heat in the main course. Inevitably there was some loss. Coffee and soup are sent to the wards to be poured on each floor so that these were served to the patient piping hot. There were few changes in menu. Desserts were of simpler types and one vegetable was served instead of two. In retrospect, however, dietitians think that the usual meals might well have been served.

Paper service was not, of course, new to Toronto Western Hospital. Paper water cups have long been used and also paper take-out cups for coffee. The x-ray department uses large paper cups for barium; and paper service is used for all isolation cases to eliminate one way of spreading infection.

To come back to the period being discussed, the administrator, Max Wallace, was extremely pleased by the co-operation and loyalty displayed by his entire staff during these rather hectic days. Many people worked 12 to 16 hours a day. When work went on all through the night in preparation for the next day's move, coffee urns were set up and quantities of buns supplied. The numerous paper cups were simply tossed into waste baskets and sent to the incinerator.

Hospital officials are now certain that they solved the problem of catering without a dishwasher in a fashion not only practical but desirable. If faced with a similar contingency again, they would not hesitate to use the same method but would do so with a confidence born of experience.



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Maritime Conference Meeting

in Newfoundland

Sr. Mary Brenda, St. John's, Nfld.

THE annual meeting of the Maritime Conference of the Catholic Hospital Association was held at McAuley Hall, St. John's, Nfld., August 21-23. This was the first time the meeting took place in Newfoundland. Delegates from 15 Catholic hospitals in the Maritimes attended, as well as nine hospital chaplains and other guests.

The meeting was officially opened with the Holy Sacrifice of the Mass by Right Rev. H. A. Summers, D.P. He then spoke a few words of welcome on behalf of the Archbishop, who was unavoidably absent.

In the opening session the president, Sr. Mary Fabian of St. Clare's Mercy Hospital, St. John's, Nfld., welcomed the delegates to both the annual meeting and to the province. In the presidential address which followed, she paid tribute to the pioneer sisters of the Conference. She stressed the fact that today, more than ever before, we need their faith and zeal to continue the work of promoting unity and co-operation

among our hospitals and hospital

The theme of the convention was "In-service Education for Nursing Service Personnel". The discussions were led by Sr. Agnita Claire, S.S.M., who is director of the school of nursing at the University of St. Louis, Mo., and Sr. Mary Emeline, S.S.M., from Madison, Wis. Both sisters had supplied a number of stencilled copies of their reports and other pertinent data, and their sessions proved instructive and thought-provoking.

Other prominent speakers were: Rev. A. L. M. Danis, O.M.I., executive director of the Catholic Hospital Association of Canada; Dr. W. D. Piercey, executive director of the Canadian Hospital Association; and the Hon. James McGrath, M.D., provincial Minister of Health. We were proud to have at our meeting the executive directors of both our national associations.

Father Danis, in his talk on "Keys to Progress", developed this theme in his usual impressive manner and pointed out many factors necessary to make our work more efficient and to give the best possible service to humanity. Dr. Piercey expressed

"Some Thoughts on the Current Hospital Scene". He spoke of the great changes in the hospital field today and the danger of being so engrossed in these changes that we lose sight of the four major functions of the modern hospital: care of the sick and injured, education, community health and research. In reviewing these functions, he spoke on the subject of health insurance plans-their assets and liabilities. The Hon. James McGrath gave an interesting summary of health care in Newfoundland and, delving into early history of our first settlers and their problems, he explained quite clearly why and how the major portion of health care and the various health services in this province have been for so many years the responsibility of the provincial government.

The chaplain's panel discussion, an integral part of our annual meeting, dealt with "The Teaching of Medical Moral Ethics in the Light of Present Day Trends". This topic was broken down into three main fields: science of medical moral ethics — discussed by Right Rev. E. Godin, P.P., Bathurst, N.B.; co-operation — discussed by Rev. E. Chiasson,

(concluded on page 146)

The author, from St. Clare's Mercy Hospital, St. John's, Nfld., was formerly secretary of the Maritime Conference of the Catholic Hospital Association.

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Third Quadrennial Convention

for radiological technicians

Leslie Cartwright

June of this year the Canadian Society of Radiological Technicians and the American Society of X-Ray Technicians for the third time joined forces in a big international convention held this time at the Queen Elizabeth Hotel, Montreal, Que. Registration reached an all-time peak of 1,584. Of this number, 124 members had been in Montreal during the previous week taking one of the two advanced pre-fellowship coursesthe English course at McGill and the French course at the University of Montreal.

The convention activities began on Saturday, June 24, when a series of all-day workshops consisting of lectures and discussions was attended by nearly 1,000 delegates. On Sunday afternoon a panel discussion on school accreditation and technician training was held, the panelists being Maurice M. Haskell, M.D.; J. G. Stapleton, M.D.; Jean-Pierre Jean, M.D.; Clark Warren, R.T.; Alfred Greene, R.T.; George F. Koenig, R.T., and Wm. Doern, R.T.

The official opening ceremonies took place on Monday morning before an impressive assembly from all over the United States and Canada, His Eminence Cardinal Léger pronounced the invocation and His Worship Mayor Drapeau of Montreal welcomed the delegates. Greeting were also extended by Dr. E. A. Petrie, Dr. Guillaume Gill, Dr. Carleton B. Peirce, Dr. S. A. Morton, Dr. Jean Bouchard, Dr. Chester H. Warfield and Dr. Albert Jutras - all of whom represented various North American radiological organizations. Speaking for the technicians were Mrs. Marjorie Tolan, R.T., president of the A.S.X.T.; Katherine Creelman, Creelman, R.T., president of the C.S.R.T.; G. Archie Wilkinson, general convention chairman; and Floyd Driver, R.T., chairman, board of directors of A.S.X.T.

At the opening luncheon Mrs. Mary F. Cameron, R.T., secretary of the North, Central and South American section of the International Secretariat of Radiographers and Radiological Technicians — a world-wide organization formed at the Ninth International Congress of Radiology at Munich — invited her listeners to be held in Montreal in 1962 in conjunction with the Tenth International Congress of Radiology.

From Monday to Thursday nine refresher courses were held from 8 to 10 a.m., the subjects presented covering all phases of radiography and radiotherapy, as well at teaching methods. From 10.15 a.m. till noon separate business sessions were held by the A.S.X.T. and C.S.R.T. Following the luncheons, joint technical sessions were held at which 15 papers were given. An ample program of social activities, made possible by the generous cooperation of the commercial firms, occupied the evenings. Excellent film exhibits from the United States and Canada attracted large crowds of note-taking observers. More than a dozen awards were presented for the best essays and exhibits.

The convention reached its climax on Thursday afternoon when the two memorial lectures were given: Dr. Guillaume Gill of Radium Institute in Montreal presented the Tenth Welch Memorial Lecture, and Mr. Richard Olden of Johns Hopkins Hospital in Baltimore gave the A.S.X.T. Jerman Memorial Lecture.

A most successful convention terminated on Thursday evening in a banquet and dance with over 1,000 people in attendance. Following the banquet the new officers were inducted. The retiring president of the C.S.R.T., Katherine Creelman, placed the chain of office on the able shoulders of G. A. Wilkinson, Royal Victoria Hospital, Montreal, Que., and inducted Jane Martin of the McGregor Clinic in Hamilton, Ont., as the new vice-president.

4,286 Cases Treated at W.C.B. Hospital

The Workmen's Compensation Board Hospital and Rehabilitation Centre in Toronto, Ont., is concerned with total rehabilitation of those injured in industry in this province. Thus the majority of cases admitted to the Centre are for treatment of accidents, although a much smaller number of industrial diseases and medical conditions are also admitted. The hospital is one of three departments operated by the Board, the other two being the Medical Department and the Vocational Rehabilitation Department.

The Medical Department is responsible, in addition to other duties, for the provision of high quality medical care, both initially after the accident, and also later in the treatment program.

The Vocational Rehabilitation Department is responsible, if the patient has a significant temporary or permanent disability, to assist in job placement, selective work, and to arrange vocational re-training in selected cases.

No major surgery is performed in the Hospital and Rehabilitation Centre, which is primarily designed for early convalescence, treatment by physical medicine and evolution both physical and vocational. The Centre has accommodation for 180 patients in the hospital section, 340 in the clinic dormitory and up to 60 day-patients.

The program of total rehabilitation is tailored to fit the needs of the individual patient. Thus in the hospital section, the nursing services form a prominent part in the care and treatment of the patient, whereas with the up-patients in the clinic dormitory, nursing services are only occasionally required. Some patients are admitted solely for treatment by physical medicine, while others may be admitted solely for an evaluation of their physical condition, strength, endurance, et cetera.



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C.S.R, and Purchasing (concluded from page 57)

pital, except for a few different kinds which are necessary in special departments. From this conference the purchasing agent might discover that there is a sponge available which is more useful and yet more economical than some previously used. A conference of this nature gives him some insight into the use of medical supplies. It will also give the C.S.R. nurse and other department heads an idea of the cost of a simple commodity such as a gauze sponge, when viewed over a yearly period. Making people costconscious succeeds in making them waste-conscious.

Labour-saving devices are becoming more common, particularly in the line of disposables. One may rationalize the increase in cost by saying that these items are labour-saving; that they relieve staff from the work of preparation to do - what? If the staff is not decreased, what has been accomplished? Every C.S.R. supervisor dreams of a department completely stocked with disposables. She should, instead, take a careful look at the situation and perhaps do a cost analysis involving initial cost, time of preparation and cost of materials used in preparation. If, after this, she can still justify the purchase of disposables, the purchasing agent will probably co-operate with her

Perhaps the most common difficulty in reaching an understanding between nurses and purchasing agents is the fact that nurses feel they are not consulted enough about the purchase of equipment and supplies. To cite an example, a convincing salesman sells the purchasing agent a new and cheaper product. Without consulting the nurse, the agent introduces it in the hospital, even though he may be completely unaware of its faults. It looks good, passes government specifications, is a good price, but when put to use, it is found to create much dissatisfaction. In the mind of the nurse this is bound to create a few strikes against any purchasing agent.

If he asks the staff for opinions about a new product he is trying to introduce, he may hear such comments as the following: "What is wrong with the ones we're using?" and "Are these cheaper?" It would seem that to overcome this attitude, the purchasing

agent must sell himself. He must prove to the nurse that he respects her opinions. If, for example, she orders a specific item from a certain company, she should show the purchasing agent that she has a good reason, and does not simply wish to have her own way. It is the privilege of the purchasing agent to suggest a modification.

A new product such as gloves should not be put into general use until it has been tried out by the people using it most often. It should be judged on specific points; for example, in the case of gloves the following features should be considered - comfort and grip (can the nurse hang on to wet instruments?), degree of sensitivity to touch (can the doctor manipulate in a delicate area?), and, of course, durability and price. The results should be reported and kept on file, to be referred to when necessary. Whatever else, one should keep an open mind about new ideas and products. The C.S.R. nurse can be of great assistance to the rest of the nursing staff and the purchasing department by keeping on file, records, reports and new literature. These should not be filed just for statistical reasons. By referring to them, the nurse will be aware of any sudden increase or decrease in supply, and can investigate the reason; she will notice any increase in the number of breakages, and can find out if this is the fault of the product or just the new class of pre-clinical students on wards for the first time; and she will have duplicates of previous requisitions which will provide the necessary information for re-ordering.

Conclusion

It is possible that problems may arise from a source entirely outside the nursing and purchasing departments, for example, the administration, disagreement of the medical staff, and other departments receiving priority in the hands of the financial controller. There is certainly a great lack of understanding among the nursing personnel of the way moneys are distributed, the extent of the working budget and, in general, what the hospital is spending its money on.

Whatever the cause of the problem, much can be accomplished by co-operation, understanding and a little effort on everyone's part.

C.S.R. and the Wards (continued from page 57)

It is important, therefore, that the C.S.R. staff knows what policy to follow instead of depending on someone's whim. Hoarding can develop quite innocently. The nurse may fill in her daily order sheet the same way every day whether supplies are needed or not, rather than checking what is on hand and then ordering accordingly. One way of combatting this is to have each ward set up a quota list after giving careful thought to whatever emergencies might arise on the particular type of ward, and what supplies should be on hand to meet the daily requirements. This list should then be posted on the supply cupboard to allow daily stock checks and to maintain the ward supplies at an optimum level. The list could be amended up or down as the needs fluctuate. All special supplies that are given out by C.S.R., for example, trays, equipment, et cetera, are marked in and out so that C.S.R. knows where they have gone, and can call them in if they remain out too long. This facilitates the prompt return of used supplies and cuts down on the amount of stock out in circulation.

2. Standardizing procedures. It is amazing how many different ways one nursing procedure can be done. In working with nurses trained in various schools as well as in other countries, it is quite natural to have many different methods. One way may be very thorough but too complicated to carry out during a busy schedule. Consequently, short cuts are sought, but these may not always be in the patient's best interest. It is important to have some person or committee responsible for setting standards and seeing that they are adhered to.

Some hospitals now have a committee, consisting of representatives from the various departments, whose duty it is to study the procedures carried out in the hospital. They set up a procedure that can be done in the shortest and simplest way possible, and still give the best service to the patient. After adequate trial, it is introduced at a meeting of the head nurses. Notices are placed on every ward to be kept in the procedure book for future reference — which is especially helpful to new staff.

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The C.S.R. sets up a tray to meet these standardized procedures. It is happy to do so, as this eliminates trying to supply the many extras that are used infrequently. These revised procedures are not always eagerly accepted because some members of the nursing staff are very resistant to change. ("We've been doing it this way for years. What's brought on this sudden change?") It is a little more difficult to standardize procedures with the medical staff members, as they practise in several hospitals. Each hospital may have a slight variation in the procedure and the doctor may prefer that of hospital "A" to that of hospital "B". Some doctors may demand these little extras, making it awkward for the ward nurse and difficult for the C.S.R. But on the whole, most doctors are co-operative and follow the procedures of the hospital. The advantage in standardizing procedures is that less varied equipment has to be stocked, and what is in circulation will be used as it was intended.

3. Selection of new equipment. What should be purchased? Those with the authority to decide should consult with the nursing staff before equipment is brought into use, or have it tested in a ward so that opinions may be formed as to how durable or practical it is. After studying these reports, the purchasing agent will decide whether or not to buy the item.

The nursing staff should have thorough instruction on all new equipment before it is put into use. This will not only save the equipment, but will give confidence and competence to those using it. With more complex machines, literature should be available for periodic reference.

Head nurses' meetings are a

good medium for introducing new products available on the market. Here opinions can be obtained from those who will be using the product, and the purchasing agent can be advised accordingly. This is a good procedure to follow when samples have been left for trial use.

One group of products which are gaining popularity is disposables. They are ideal for wards with communicable diseases, particularly infectious hepatitis. The viruses which cause this disease are hard to destroy with ordinary sterilization methods. One cannot be too careful in the disinfection and cleaning of needles used on patients because the disease may be spread to other patients. It has been recommended that all needles used on hepatitis patients be disposed of, but this would be an expensive procedure if the regular type multiple injection needles are used. Disposables are proving to be the best solution to this problem, and many hospitals are now using disposable syringes and needles for all infectious diseases. In this way protection from cross-contamination is assured. There has been a gradual changeover to many other disposable products such as levine tubes, suction and oxygen catheters, and urinary drainage tubes - all of which have met government specifications.

The selection of equipment is a never-ending process. Disposables may not always be the cheapest product in the catalogue, but when one takes into account the additional work-hours needed to maintain regular equipment, then the difference in cost is much reduced. Rising standards in our hospitals today demand the safest and most efficient equipment, and this will call for increased activity on the part of the purchasing agent. Not only will more ordering

and purchasing be required but it will be necessary to evaluate new products more frequently. In selecting new equipment of any kind, the ward nurse will assume greater importance.

4. Servicing equipment. In every hospital there appears to be a standard regulating the quality of equipment being circulated by the C.S.R. Although new equipment is most desirable to everybody, it is still possible to keep many items in service for long periods of time. On the other hand, supplying the wards with deteriorating equipment will cause complaints, ill feelings, loss of time and discomfort to the patient. This can be avoided by having trained personnel check all equipment before it is returned to supply room shelves. It is more economical to have trained staff do this checking daily, than to waste the doctor's or nurse's time on the ward trying to use faulty equipment.

Not only should all equipment be checked by C.S.R. staff, but here the decision to discard or repair should be made. In the case of equipment to be discarded, someone with a sensible and judicious approach is needed because there is no room for sentimental attachment to useless goods. A good repair man can prolong the usefulness of many of the more expensive items, and arrangements may be made with outside repair shops to do more extensive work on larger items. Electrical equipment is most important and must be checked on each return by an electrician. By following these guides it is possible to get more use out of supplies and keep the orders for new equipment down to a minimum.

In achieving economy and efficiency in the hospital, cooperation among the nursing staff, C.S.R. and purchasing agent is essential.

Treatment Report on Mental Health Needs in B.C.

The Hon. Eric Martin, Minister of Health Services and Hospital Insurance in B.C. has released a report of the survey of the mental health needs and resources of British Columbia, which was undertaken by the American Psychiatric Association.

The report contains 50 major recommendations, but does not establish a table of priority of their importance or urgency, nor does it lay out a program with goals to be attained at the end of five, ten or 15 years. The survey team made no studies of the costs involved in implementing the recommendations, nor was the impact of these costs upon the provincial economy calculated.

The B.C. government has taken the report into consideration in its decision to effect regionalization of services, the first step in this direction being the planned construction of a hospital and mental health centre in Victoria to serve Vancouver Island. At the same time preliminary studies for a mental health centre for the Okanagan area had commenced. The government has decided to support the development of psychiatric wards in general hospitals through 50 per cent hospital construction grants. As an example approval has been given to the Royal Jubilee Hospital in Victoria to expand its psychiatric ward to approximately 40 beds.

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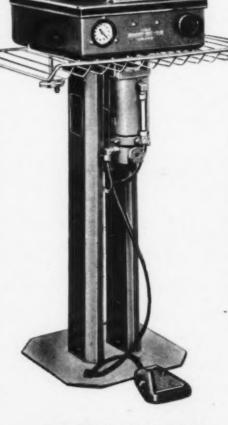
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PUBLICATION DATE

May, 1962

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recent federal grants

Construction and Renovation

The Hôtel-Dieu Saint-Vallier, Chicoutimi, Que., has received a grant of \$7,850 to help with the building costs of a new speech therapy and audiology centre.

A sum of more than \$402,000 has been awarded to the Royal Victoria Hospital, Barrie, Ont., for new construction and renovation. Upon completion the capacity of the hospital will be increased by 92 beds. A two-storey addition will be constructed over the 1951 wing, plus a four-storey addition on both sides of the northern section of the wing. The new 34-bed addition to the nurses' residence will have four storeys and a basement linked to the hospital by a tunnel. Other improvements will permit major reorganization of the dietary, paediatric, obstetric and nursery depart-

A grant of \$37,300 will assist South Huron Hospital, Exeter, Ont., in the erection of a 16-bed wing to provide additional active treatment beds and related services.

Renovations to all three floors of Ross Memorial Hospital, Lindsay, Ont., will be aided by a \$27,300 grant. Improvements to walls, floors, electrical and mechanical services, as well as re-arrangement of areas serving patients, are included in the renovations. Some space no longer required for treatment purposes will be converted into a training school for certified nursing assistants.

Grace Maternity Hospital in Halifax, N.S., will receive \$341,000 for the construction of new wings to the present building. One hundred and eleven active treatment beds will be added, bringing the total to 183, and 153 new bassinets will increase nursery accommodation to 223.

A total grant of more than \$95,700 has been awarded to Welland County General Hospital in Welland, Ont. The sum of \$40,290 will help to provide adequate modern accommodation for 92

chronic care patients, Improvements will include new wiring, fire-protection, redecorating, and the conversion to patient accommodation of areas formerly occupied by operating rooms, obstetrical suites and nurseries. The sum of \$55,500 will be used to provide new living quarters for 74 resident nurses. Other facilities will include library, recreation room, refectory and other related services.

Major renovations to the present laundry at the Niagara Peninsula Sanatorium, St. Catharines, Ont., will be carried out in part with a grant of \$5,600 which will enable the handling of a laundry load of 24,000 lbs. per month. This increase in laundry has been caused by the partial conversion of the sanatorium to a general hospital with 25 active and 24 chronic beds.

A 108-bed nurses' residence is to be erected at Victoria Hospital in London, Ont., with the aid of a grant of \$221,500. The new residence will include educational facilities and all related training services for student nurses.

The sum of \$321,100 has been awarded to Hôpital Saint-Joseph, Rimouski, Que., to assist in its construction program. The money will help to provide space for 144 active treatment beds and 15 bassinets. In addition, construction plans include a full floor of operating rooms with ancillary services, a pharmacy and a department of physical medicine.

Montreal General Hospital in Montreal, Que., will benefit by a grant of \$28,000 for structural alterations. This sum will help to provide more adequate facilities for prompt treatment of major casualties, as well as a separate laboratory for full-time physicists, automatic processing of x-ray films and increased fluoroscopic and cineradiographic facilities.

The Hôtel-Dieu de Saint-Joseph in Lameque, N.B., will be replaced shortly by a larger hospital. A grant of \$126,686 has been awarded toward the construction of a modern hospital and community health centre. The new building will include operating rooms, maternity suites and all related services. Accommodation will provide 42 active treatment beds, four recovery beds, two labour beds and 14 bassinets. The existing hospital will be used as a residence for hospital staff.

The Kingston General Hospital, Kingston, Ont., will renovate four floors of the Douglas Wing and add another storey with the assistance of a grant totalling \$200,000. Plans include the complete refurbishing of the four floors, modernizing layout and improving plumbing and electrical systems. The money will also help provide for centralized laboratory services and for the expansion of the x-ray department.

A new nurses' residence for the Regina Grey Nuns' Hospital in Regina, Sask., will be erected with the aid of a \$110,000 grant. The new building will provide accommodation for 84 student nurses and will include lecture rooms, laboratories, gymnasium, training area, staff quarters and a three-bed infirmary.

Caraquet, N.B., has been awarded the sum of \$153,580 to help in the construction of the new Hôpital de l'Enfant-Jésus. This new general hospital will include 60 active treatment beds, 18 bassinets, and such facilities as operating and recovery rooms, maternity suites and related services.

Prince Edward County Memorial Hospital, Picton, Ont., will be assisted by a grant of \$9,000 to be used for the addition of three new departments—morgue, autopsy room and physiotherapy department.

The Nova Scotia Hospital, Dartmouth, N.S., will receive \$262,275 to assist in the construction of a nurses' residence. Upon completion the seven-storey building will provide living quarters for 255 nurses and will include teaching facilities. The hospital has also received another grant of \$16,400 to help meet the costs of reinforcing the floors and walls of two areas of the old building to provide new heated airing balconies. Upon completion of the current renovation program, the old building will have been thoroughly modernized.

Major renovations to the Bella Coola General Hospital, Bella Coola, B.C., have just been completed with the assistance of a grant of \$6,700. The money was used to modernize the wards and

CANADIAN HOSPITAL



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with the auxiliaries

T.B. Hospital Auxiliary Concentrates on Fund Raising

During the past few years the women's auxiliary to the Halifax Health Centre, Tuberculosis Unit, in Halifax, N.S., has carried out such varied fund-raising projects as bring-and-buy sales, card parties, penny auctions and rummage sales. With the proceeds the members have purchased an electric wall clock, an electric hair dryer, stainless steel pots for the patients' trays, lamps and window drapes for wards and sitting rooms, and magazine subscriptions, as well as gifts for patients and their families at Christmas.

Tartan Tea and Fair Big Success

A major project of the Colchester County Hospital Women's Auxiliary in Truro, N.S., was the Bonnie Tartan Tea and Fair which netted \$1,570. In the Legion Hall 12 booths were trimmed with Nova Scotia tartan and decorated with cutouts of bagpipes, rabbits wearing tartan, Nova Scotia crests and whiskered gentlemen in tartan tams. Items such as jars of homemade jams, pickles, cakes and candy, garnished sandwich loaves (each one named after a tartan), and hand-knit articles, had a quick sale.

Other women's organizations and individuals throughout the county donated prizes and combined their efforts with the hospital auxiliary to ensure the success of the fair.

South Peel Auxiliary Has Big Membership

The women's auxiliary to South Peel Hospital in Cooksville, Ont., has reached a membership of more than 2,500 to become one of the largest in the province, even though it was formed less than six years ago. Members come from 29 areas, and have devoted 14,000 hours of their time in services which included driving

816 out-patients to the hospital for treatment, packaging dressings, and staffing the gift shop and patients' library service.

Large Budget Approved for Preventive T.B. Work

The Central Council of Women's Auxiliaries of Freeport Sanatorium, Kitchener, Ont., recently approved a budget of \$43,605 for preventive tuberculosis work. This figure includes \$7,000 to pay half the cost of a new bus to replace the present one being used as a mobile x-ray unit.

The money is raised by the sale of Christmas seals by ten auxiliaries. The budget allows \$6,800 for the cost of seal sales. Other items include \$6,000 to operate the mobile clinic; \$6,000 for the chest clinic at Freeport Sanatorium; \$500 for a chest clinic at South Waterloo Memorial Hospital, Galt; and \$1,500 to operate x-ray clinics at St. Mary's General, Kitchener-Waterloo and South Waterloo Memorial Hospitals.

Halifax Auxiliary Gives Hospital Strong Support

The aim of the women's auxiliary to Grace Maternity Hospital, Halifax, N.S., is to help the hospital in a substantial way. Consequently, the largest purchase in the last three years was 62 complete nursery units for the hospital's new wing. at a cost of over \$12,000. Recently, beds, dressers, over-bed tables, mirrors, easy chairs and a night table were bought at a total cost of \$5,265. Money is raised by the 100 members through rummage sales, white elephant auctions, catering, the sale of greeting cards, a June fair, a showcase in the lobby of the hospital and a travelling wagon.

One of the auxiliary's unusual projects is a birthday party held in September. Each lady receives a bag in which she puts a cent for each year of her age. The members are often surprised to find they have centenarians in their midst!

Auxiliary Helps Infirmary in Many Ways

The Halifax Infirmary Ladies' Auxiliary, Halifax, N.S., carries out a full program of service and fund raising every year which ranges from making hospital dressings to furnishing wards. This past year cash for the hospital was realized from the sales of a cook book published by the auxiliary, a memo calendar and Christmas cards. A new project started last year was the award of two annual prizes to graduating nurses. The prizes consisted of two completely outfitted surgical cases.

Shop Planned to Raise Funds

The Surrey Memorial Hospital Women's Auxiliary, North Surrey, B.C., is planning to establish a superfluity shop in the Whalley area as a continuing project to raise funds for the hospital.

The Hilda Sullivan Branch at Cloverdale, recently presented three rocking horses to the hospital for little patients in the children's ward.

Patient Rides "Ferris Wheel"

A new kind of electric bed, which looks like a ferris wheel, has been presented to the Royal Jubilee Hospital in Victoria, B.C., by the women's auxiliary. The \$800-bed is being used in the men's surgical ward for vertical rather than lateral turning of the patient: for example, if the patient had a spinal fusion, the nurse can turn him from the supine to the prone position with no harm to his back.

By setting a switch and pulling a lever, the patient can control the movement of the bed. At the same time, safety features ensure that the bed will not turn too far. The number of positions the patient can assume, virtually on his own, gives him a feeling of independence which may speed his recovery.

White Rock Has Successful Year

In the past year the members of the White Rock District Hospital Women's Auxiliary, White Rock, B.C., gave \$4,500 to the hospital. Part of this sum consisted of the proceeds from the auxiliary's annual country fair which drew a crowd of 744. Additional funds came from sales in the superfluity and portable shops. Also the summer months were full of activities such as strawberry teas,

(continued on page 160)



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Improved Radiological Services in B.C.

HE improved standards of patient care in British Columbia hospitals since the advent of the Hospital Insurance Service in 1949 is reflected in the increased volume and scope of hospital radiological services. Prior to hospital insurance, a number of hospitals were unable to provide their patients with adequate radiological services. This was mainly due to the tremendous cost of equipping a radiological department and employing qualified technicians. However, with the assistance of federal and provincial governments, through the provision of grants-in-aid and advisory services, there has been an increase in the availability and quality of radiological services. An indication of this is apparent when comparing the 450,000 x-ray films and fluoroscopies done in 1950 to almost 850,000 done in

The Radiological Advisory Council, appointed by the provincial government in 1955 to advise the Department of Health Services and Hospital Insurance and to assist hospitals, has played a prominent rôle in the development of these essential services. The Council comprises 8 members representing the Canadian Medical Association, B.C. Division; the B.C. Hospitals' Association; the Faculty of Medicine, University of British Columbia; the provincial Health Branch; and the B.C. HosR. H. Thompson Victoria, B.C.

pital Insurance Service. It's primary objective has been to improve the quality of diagnostic radiology services in general hospitals; to assess the existing facilities and determine future needs in various areas of the province; to advise on the planning and equipment of x-ray departments in new hospitals under construction; and to establish training facilities for radiological technicians, and conduct workshops and refresher courses. There are hazards inherent in the use of x-ray equipment to both staff and patients and the Radiological Advisory Council has recommended a radiation survey to ensure that equipment meets the required safety standards and is operated in a manner that will keep radiation to a minimum. Another example of development is the Regional Radiological Service, which, after study and recommendation by the Council, was established in the East Kootenay area to serve seven hospitals, none of which was large enough to support or justify the full-time services of a radiologist. These hospitals are now able to provide their patients with additional services -a radiologist to do fluoroscopic examinations in his own department and the interpretation of radiographic films in consultation with the local doc-

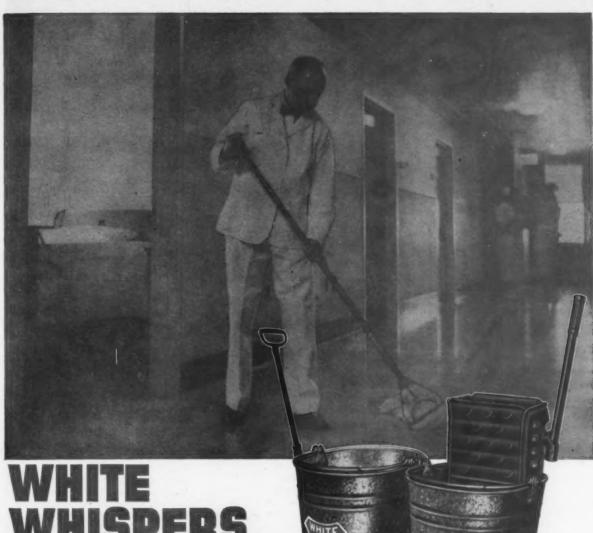
The B.C. Hospital Insurance Service provides grants of onethird of the cost of the approved equipment, in addition to which each hospital receives, through its

per diem rate, an equipment replacement allowance of 20c per patient day. In view of the costly equipment involved and the limited number of trained personnel, it is imperative to avoid a duplication of equipment and services within an area, and to co-ordinate these on a provincial basis. In recent years an accelerated program of hospital construction has provided numerous areas of the province with new buildings, incorporating adequate radiological departments.

Small outpost hospitals have limited equipment and services, and are usually supplied with a mobile unit for minor x-ray work. Hospitals of 20 beds and up progressively require larger stationary models of from 100 to 500 milliamps. With the recent advances in image amplification and cinefluorography, some of these units are now being used in the province, so that the radiology service can keep abreast of the newest developments in this field. The largest units are usually located in hospitals serving the larger metropolitan areas. The 500 M.A. unit costs approximately \$20,000 and, for an additional \$12,000, an image amplifier for fluoroscopy can be added to amplify the picture, making possible a more accurate and detailed diagnosis. Technological advances by medical science in the field of radiography have increased the versatility of these services.

Increased radiological services form just one aspect of the improvements in the standards of patient care in recent years. It is significant to note that in 1960, 24 general hospitals were listed as being accredited by the Canadian Council on Hospital Accreditation - more than twice the number accredited under the American College of Surgeons Program in 1949, and 10 more than were accredited in 1953. The result is better care for more people in British Columbia public pitals.

The author is with the public information section of the B.C. Hospital Insurance Service, Department of Health Services and Hospital Insurance, Victoria, B.C.



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DOCTORS, PATIENTS, AND HEALTH INSURANCE, by H. M. Somers and A. H. Somers, Published by the Brookings Institution, Washington, D.C., 1961. Pp. 576. The authors of this penetrating

The authors of this penetrating study of medical care issues and trends believe that "In American culture neither the recognition of science nor the willingness to translate it into technological tools is a major problem . . . Our difficulty lies in another area, not as readily recognized and not as adaptable—the area of social organization and financing. These factors ultimately determine the extent to which scientific and technological advances can be transformed into diagnosis, prevention and treatment of disease."

Technological advances, according to this book, transform medical care into a highly organized and institutionalized industry with ambulant patients increasingly served by community hospital-medical centres. They may also result in continuing growth of paramedical professions, private and public health insurance, medical group practices and chemo-therapy. All of this changes relationships between professional persons, institutions and patients.

Among other matters discussed are pricing of medical care components, neglect of nursing and clinic facilities, activities of competing local hospital groups, apparent defeat of private health insurance at community rating, and preponderance of insurance overemphasizing in-patient benefits.

The authors urge continuing reappraisal of trends. "Change is inexorable. Freedom to avoid the fact of change does not exist—either biologically or socially — but the character and adequacy of adjustment to change is, within varying limits, subject to human decision. It is, of course, possible for a society or a group to attempt to resist adjustments altogether — either actively or by inertia — but the price is to be run over."

This enlightened, thoroughly researched book is recommended to everyone interested in any aspect of hospital operations. Although the tremendous body of data is taken from the U.S. scene, the discussions and conclusions also pertain to Canada.

—Werner R. Mattersdorff, Graduate School of Public Health, University of Pittsburgh, Pa.

PRINCIPLES AND TECHNICS OF REHABILITATION NURSING. Second Edition. By Florence J. Terry, B.A., R.N., P.T., O.T.; Gladys Benz, R.N., M.A.; Dorothy Mereness, R.N., A.B., M.N., Ed.D.; Frank R. Kleffner, Ph.D.; and Deborah M. Jensen, R.N., M.A. (Editor). Published by C. V. Mosby Co., St. Louis, Mo., 1961. Illus. Pp. 344. Price \$6.

With the rapid development of rehabilitation nursing over the past few years, there has been a growing need for trained personnel on the rehabilitation team. In this book the basic principles of rehabilitation nursing are explained in detail, and the special knowledge necessary in dealing with different handicapped individuals is given. In this edition many sections have been rewritten and more information has been added. A completely new chapter, "The Home of the Handicapped Person", has been included.

This book will be valuable not only to registered and student nurses, but also to other members of the nursing service personnel functioning on the rehabilitation team, such as practical nurses, hospital aides and nursing technicians.

TEXTBOOK OF PHYSIOLOGY. Fourteenth Edition. By W. W. Tuttle, Ph.D., Sc.D. and Byron A. Schotteliua, Ph.D. Published by the C. V. Mosby Co., St. Louis, Mo., 1961. Illus. Pp. 547. Price \$7.

In this new edition an attempt has been made to include most modern concepts of human physiology. Some of the chapters have been rewritten, much new material has been included and old material deleted. Among the new features are the new concept of ideal weight and figures showing heart catheterization. The text material has been reorganized in a more logical sequence to facilitate its teaching and understanding.

MEDICAL - SURGICAL NURSING.
Second Edition, By Kathleen Newton Shafer, R.N., M.A.; Janet R.
Sawyer, R.N., A.M.; Audrey M. McCluskey, R.N., M.A.; and Edna Lifgren Beck, R.N., M.A. Published by the C. V. Mosby Co., St. Louis, Mo., 1961. Illus, Pp 876. Price \$8.75.

It is the purpose of this book to give a broad general background in the nursing of patients who require medical and surgical treatment. Increasingly the nurse must know the why and wherefore of her nursing acts and take legal responsibility for them. Consequently, attention has been given in this book to some simple everyday conditions about which the nurse may be asked, and to teaching the patient and his family both at home and in the hospital.

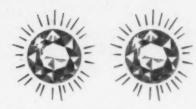
The book is divided into two sections. The first deals with general subjects and trends. It is intended to focus thinking on the nursing needs of patients and to prevent endless repetition. The second section concerns nursing care for patients having specific medical and surgical treatment. Study questions at the beginning of each chapter have been prepared to assist the student to review basic pre-clinical subject matter not repeated in the text. The references indicate material well suited for student reading.

HOME CARE, Hospital Monograph Series No. 9. By David Littauer, M.D., I. Jerome Flance, M.D. and Albert F. Wessen, Ph.D. Published by the American Hospital Association, Chicago, Ill., 1961. Illus. Pp. 110. Price \$2.75.

The purposes of this booklet are to describe the organization and operation of a typical hospital-based home care program based on the example of that of the Jewish Hospital of St. Louis, Mo.; to compare it with other programs sponsored by hospitals, visiting nurse and other community agencies, public health departments and medical schools; and to examine the obstacles that have hindered rapid development of this community health resource. From this, some general conclusions about the worth and potential of home care are elaborated.

(continued on page 172)





It's hard to see the difference in these two stones, but under a jeweler's glass one is easily identified as a diamond and priceless, the other a zircon, used in inexpensive jewelry. It's what's IN the stone that makes the difference.

there is a difference



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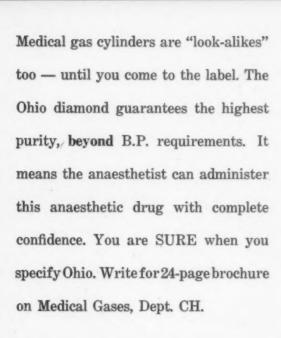
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Helium

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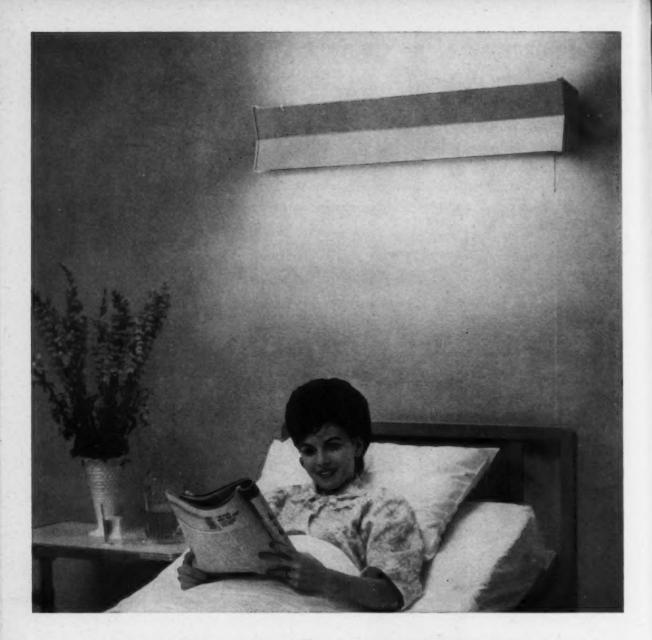
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PHARMASEAL

Mapping the Work Area (concluded from page 56)

hooked up to a remote compressor unit. The deep freeze unit is also - and this is as often as not a prefabricated unit assembled on the site, containing its own compressor unit. These units are usually a source of trouble in a peculiar way. If you do happen to have a slab on grade floor, the permanent freezing action within the unit drives the heat out of the floor below and it has been known to produce an ice lens below the floor. This ice lens causes an expansion which heaves the floor creating serious damage in some cases.

Office Space

Of course, no self-respecting individual in any hospital would be content without an office, or two. Outside light could be provided here. Ideally this office should be in two separate locations — one convenient to the loading dock and one in the hospital complex where both requisitions for supplies and the ever-present salesman may be received. A counter and wicket at the dispatching end permit the passage of goods over to the applicants without the necessity of introducing anyone to the temptation of theft. This should be close to the elevators and dumbwaiters that connect to the other areas of the hospital.

The Winnipeg General Stores Sandwich

This particular unit is situated at the south end of the Winnipeg General Hospital. It has been called a stores sandwich, because that is literally what it is. The stores is the nine-foot sandwich filling between the kitchen and the cafeteria. On the lower floor is the kitchen and all its adjunct facilities; the upper slice is the cafeteria seating 720 persons with a lounge accommodating approximately 70 people. The stores area in this case is just at grade level. In order to accommodate large trucks, a depression has been created to provide a loading dock, and at the end of the 22 foot truck court is the levelator leading to an ample uncrating and re-ceiving area. The area of this unit is some 15,000 square feet, including the truck court stairs, small garbage refrigerator, can washroom, and staff locker room. In the immediate area is a freight elevator connecting to the kitchen stores below. At the other end of this space is the purchasing office, right

next to the service elevator group which connects to the service core of each floor above. Here is space for the purchasing agent and his office staff of four. There are no windows in the storage space and the floor is hardened concrete over an area of roughly 100 feet by 100 feet. Outside of this area, yet with a connecting link and separate loading dock, is the storage vault for inflammable goods, specially constructed with explosion panels and safety devices.

In the area immediately below the loading dock, and clustered about the freight elevator is a variety of built-in refrigerators and a cooler — one fruit and vegetable cooler and one refrigerator, and one refrigerator each for dairy products, meat, and fish. In addition there is a two-compartment deep freeze and thaw-out section. The butcher shop is adjacent to the meat and fish refrigerators and the freight elevator. In one corner of the kitchen is a relatively small area that has a name which never fails to bring me a small chuckle. This area next to the dietary office is called the nourishment centre.

In conclusion, I would like to enter a plea in defence of my profession. Don't undersell the value of consulting with your architect on all phases of the job.

Stores Department

(concluded from page 61)
these supplies properly stored in lockers, refrigerators, root cellars, et cetera, and as with the central stores, these areas should all be under lock and key with the head of the dietary department personally pocketing the key. Only she or her assistant should be responsible for distributing the foodstuffs.

Regarding supplies requisitions in a smaller hospital, it is not necessary to insist that daily requisitions be written to authorize the removal of foodstuffs from areas other than central stores. It may be done in larger hospitals but this is entirely within their prerogative. Despite the pressure under which the head dietitian is working, she must ensure that careful records are kept and placed on file for each shipment which comes into her department.

Pharmaceutical Stores It must be recognized that in many smaller hospitals the person appointed as storekeeper is usually not in a position to check competently in-coming drug supplies and certainly not qualified to handle the issuing of such supplies. Indeed these supplies should not be placed in a central storeroom at all, but should go directly to the drug room or pharmacy stores. While the storekeeper may receive and sign for pharmaceuticals in bulk, this is generally as far as his responsibility should go. In quite a number of smaller hospitals this is undertaken by the director of nursing or another senior nurse. Theoretically the director of nursing, who probably places the drug orders, should not also physically check such supplies but in practice it is hard to quarrel with this arrangement. In many cases she is

the only person with sufficient knowledge on the subject to handle the job and, in addition, her usual day-shift schedule makes this arrangement convenient for all concerned. In handling the stock the same procedures as laid down for the storekeeper should be followed here.

Equipment

Following is a list of equipment which would help cut down the man-hours spent in the stores department. It is by no means conclusive.

- 1. For most hospitals a telephone in the central stores will save the storekeeper a lot of steps.
- 2. There should be a desk or usable writing surface in the central stores. Again in the larger hospitals this will also be required in the stores receiving area.
- 3. There should be vehicles suitable for moving a variety of stores—including drums, bulky cartons, fragile materials, oxygen cylinders, et cetera
- 4. There should be equipment for opening packages—metal shears, a staple remover, a claw hammer and whatever other items are needed.
- 5. There should be drum dispenser racks for liquid soaps, waxes, et cetera,
- 6. There should be graduated containers for measuring supplies issued. If the storekeeper is given the necessary tools, money will be saved in the long run.

Among the questions asked in the examination of an applicant for a place on the police force was this one: "What would you do to disperse a crowd quickly and quietly?"

The answer was: "I'd pass the

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Kennedy Agencies Ltd., P.O. Box 352, Shedioc Rd., Moncien, N.B McKenzie Stephenson Ltd., 345 Higgins Ave., Winnipeg, Manitoba Kirkland & Rose, (I & A) Ltd., 130 Water Street, Vancouver, B.C. Scope, Functions (concluded from page 55) tain essential activities and carries them out with a uniform degree of efficiency and convenience. In this case the essential activities are the purchasing and storage of supplies for all operating departments. The centralization of these activities allows the other departments to devote full time to their own specialized tasks.

Place in the Organization A 1960 survey of 210 hospitals of all sizes and types in the U.S.A. indicated that 29 per cent had established purchasing departments. These hospitals averaged from 75 to 3,400 beds. Some of those without purchasing departments were as large as 300 beds, and the job of procurement was carried out by ancillary administrative persons. The average size hospital with a purchasing department was 487 beds, but 30 per cent of these had fewer than 200 beds. Eighty per cent of all the purchasing departments established were accountable to top management — a clear indication of the importance of purchasing in the eyes of management.

Responsibilities In many of the hospitals studied in the above survey the purchasing function was not the sole one carried out in the department. A great number of supplemental activities were performed which ranged from printing and publication of the house organ to responsibility plant operations including for laundry, maintenance, boiler room and housekeeping. In only one instance was a combined purchasing and personnel function performed in a hospital of 150 beds. This was of particular interest to me because my own hospital, which contains 160 beds, has combined the functions of personnel and purchasing which will be divided at some future date as the hospital grows.

According to the survey, in practically all departments, stores and stock control were included as responsibilities of the purchasing agent. The general claim was made that unless the agent was free from dependence on the storekeeper's requisition for stock, it would be impossible to buy the right amount of the right materials at the right time and the right price.

The Individual
Apart from his relationship to
management, what is the purchasing agent?

He is a working partner in the administration of the hospital, a specialist and adviser in the procurement of supplies, the hospital's "dollar conscience", a developer of specifications, the negotiator of contracts for both services and things, and finally, he is the expert in market research who is able to ferret out the best products, keeping both quality and economy in mind. In addition to the technical work required of him, he must have the ability to deal with various types of individuals and maintain good working relationships with personnel at all levels of the organization.

He is the hospital's image to the world of industry which is represented by salesmen and detail men. In this sense he shapes public relations for his hospital with an important section of the community. Finally, he must be familiar with the hospital and the functions of the various departments in order to be effective in his work.

Of most importance are the attitudes he must have — (1) toward himself — continuing evaluation, (2) toward his work — optimism and conviction of what is possible in almost every situation, (3) toward subordinates — helpfulness and understanding, (4) toward fellow workers — friendliness and cooperativeness, (5) toward the hospital — loyalty, and (6) toward people in general — interest and awareness.

The purchasing agent has already achieved junior executive status in the hospital hierarchy, and is a valued member of the administrative team. His job, however, is much more specialized than that of the administrator—which is an indication that a great deal more must be done in the education of those who perform the purchasing function.

Areas of Conflict

Among the many problems with which the purchasing agent must deal are the areas of human conflict within the hospital. There are two kinds of conflict—inter-departmental and inter-personal, Usually the situations which arise rarely cause a serious interruption of operations. However, they do exist, and hospital management must do its best to be aware of possible areas of difficulty and prevent major dislocation.

One example of conflict is an incident where a stock control record is made out incorrectly, and some department runs short of an essential item which cannot be obtained at the last minute. Conflict develops between this department and the purchasing people.

It is a common failing of many people not conversant with purchasing to think that a written request automatically guarantees immediate delivery.

A department head may order a specific item and then find that the purchasing department has substituted it with something else. Perhaps the substitution does the job just as well or better, but the department head is angry because he wanted exactly what he ordered. Consequently, conflict develops between the two departments.

Dealing with Conflict Situations

It is generally experienced that conflict situations are met in three ways which may either improve or worsen the situation. These are:

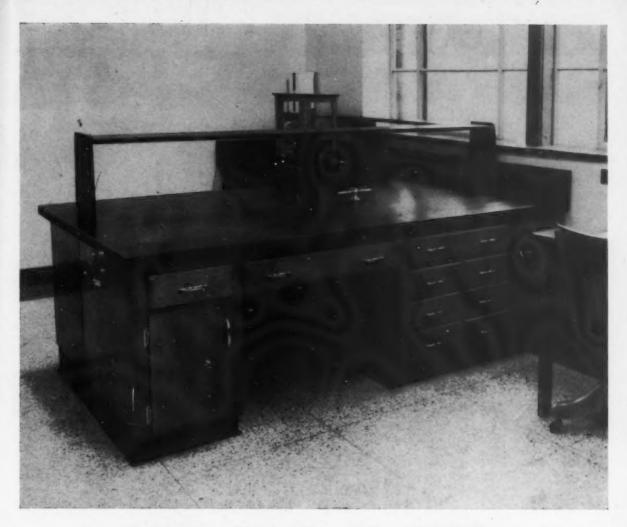
- 1. Communicative devices. The problem is brought out into the open and approached either on a person-to-person basis or through correspondence. There is an effort to talk it out and lessen tension and this results in a positive approach to the solution of interpersonal relationships.
- 2. Laissez-faire. The individuals involved ignore the problem in the hope that it will work itself out. They stop speaking to one another. Obviously this is not the proper approach, so the principals either resort to solution No. 1 or they find themselves involved in the third alternative
- 3. Overt interaction. This is "open warfare" in which the combatants engage in violent conflict. As a consequence, a bitter feud may ensue which can involve many members of the organization.

Obviously, every effort should be made to prevent conflict from developing because the means of treating it after the fact are so painful and uncertain of success. The actions in this area entail not only continual hard work toward better human relations but also the improvement and tightening up of systems of operation so that irritating errors are minimized.

Lastly, purchasing agents need a depth of focus in terms of institutional objectives, i.e. a common sense of mission which welds hospital personnel together and subordinates everything else to the goal of good patient care.

References

- 1. Keheley, Lewis R., Why a Written Policy is Basic to Good Purchasing Practice, Hospitals, J.A.H.A., Feb. 16, 1960, Vol. 34.
- 2. Burbidge, C. E., Ph.D., The Status of Purchasing, Hospitals, J.A.H.A., Jan. 1, 1961, Vol. β5. ■



A GOOD PLACE TO WORK ...

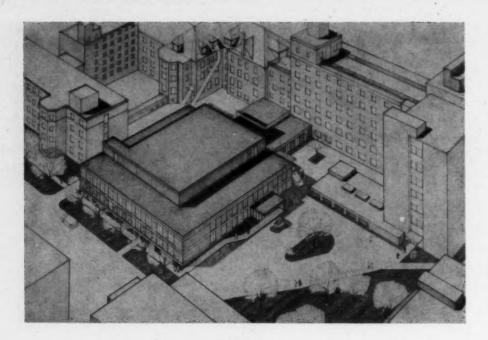
Work space, utility outlets, storage drawers, cabinets, . . . and leg-room, too . . . all where they're needed most. With extensive practical experience, our drafting and engineering staff can create the ideal layout for any hospital laboratory—whether it's a new installation or a remodelling job.

And the furniture designed by us is crafted from wood by men who know wood. The hard knocks such furniture is bound to get in its long life will only give mellowness to its warm beauty.

Fifty years from now this laboratory will still be a "good place to work".

HOSPITAL LABORATORY FURNITURE BY





New Cancer Centre in Manitoba

THE Manitoba Cancer Treatment and Research Foundation is expanding its facilities to a new building to be erected in the Manitoba Medical Centre, Winnipeg. The architects for the project are Smith, Carter, Searle and Associates, the contract has been awarded to the Peter Leitch Construction Company. It is expected that centre will be completed toward the end of 1962.

The building will be situated adjacent to the Winnipeg General, the Children's Hospital and the new Rehabilitation Hospital so that the maximum number of patients from the three institutions requiring radiation therapy may benefit as well as a large number of outpatients. The building will house under one roof all the Foundation's activities with the exception of the well equipped and modern radio-therapy unit installed in the St. Boniface General Hospital, St. Boniface, some five years ago.

Treatment techniques will include a 35 million volt Betatron, a Cobalt 60 unit and specialized facilities for whole body irradiation and treatment under increased oxygen pressure. These last two tech-

niques, which will be closely integrated with the work of the research department, also housed in the building, will, it is hoped, permit advances in the treatment of certain forms of cancer which at present do not respond well to radiation. The total cost of the structure will be \$1,440,000.

Space has also been provided in the building for the Canadian Cancer Society, where volunteer workers will be able to serve refreshments and make arrangements for patients to receive other benefits which the society provides.

Lions Gate Hospital Opened

The new Lions Gate Hospital in North Vancouver was recently completed. The multi-storeyed hospital, providing initial accommodation for 283 beds and 71 bassinets was built at a cost of \$4,035,000. The boiler plant and the laundry will be located in separate buildings. The patient accommodations on the third, fourth and fifth floors were designed in the double-corridor plan. The service facilities such as kitchen, dining room and cafeteria, storage areas, are located in the basement. The main

floor contains such services as laboratories, physical medicine, pharmacy and radiology, plus areas for emergency, administration and central supply. The second floor has four major operating rooms, a cystoscopic O.R. and a minor O.R. with fracture room. Part of the third floor houses the maternity department.

Special features in the hospital include a pneumatic tube system and a trayveyor for the distribution of food from the main kitchen to the nursing floors.

Be On the Alert

The Canadian Highway Safety Council and provincial safety organizations have issued a leaflet listing five main points for safe driving during the coming months.

Constant alertness is singled out as one of the basic requirements for safety. A spare driver and coffee-breaks are advocated as precautionary measures when travelling long distances. Motorists who are anxious to guard against mishaps are also urged to slow down, keep a sharp eye on traffic, and strictly observe regulations.

NEW GERMICIDAL CLEANER

DI-CROBE

destroys bacteria and cleans in one step

Di-Crobe Germicidal Cleaner cleans, disinfects and deodorizes most hospital surfaces in one easy step. It is the *first* successful combination of a *soapless* anionic detergent and a *phenolic* germicide.

At very high dilutions, Di-Crobe kills a broad spectrum of microbes, including resistant Staph. When not rinsed, it leaves a lasting antibacterial blanket. Quick-cleaning action and germicidal power remain stable, even when exposed to heavy soil. Non-toxic and non-irritating, Di-Crobe will not harm floor conductivity or leave a soap film when used with hard or cold water. Annotated test results available. Ask for the Di-Crobe Germicidal Cleaner Research Bulletin.



Huntington Surgical Soaps, Dispensers and Sanitation Supplies

GERMA-MEDICA* LIQUID SURGICAL SOAP WITH HEXACHLOROPHENE leaves hands surgically clean without that "dried-out" feeling. Germa-Medica with Hexachlorophene has a long history of being the favored surgical soap in many fine hospitals. Soothing emollients keep hands soft, will not irritate or sensitize. Special preservative protects against contamination during handling, from shipping to dispenser jars. And Germa-Medica with Hexachlorophene is economical ideal for use at all hospital stations.

... ideal for use at all hospital stations.

HEXA-GERM ANTISEPTIC SKIN DETERGENT
contains 3% Hexachlorophene and is a
creamy, non-irritating liquid. Daily use materially reduces bacterial flora on the skin
and produces a lasting bacteriostatic condition. For surgical scrub-up and prepping patients. Hexa-Germ has also been proved effective in preventing staphyloccocal skin
infections in the newborn nursery.



HUNTINGTON PORTABLE FOOT PEDAL DIS-PENSERS assure aseptic scrubbing techniques. Economical, trouble-free dispensers with positive action, they clean easily, will not clog. Non-corrosive stainless steel parts. Sin-

gle and twin types in models for use with soaps or detergents. All models available for sale or lease to hospitals using our soaps.

BABY-SAN* LIQUID SOAP WITH HEXA-CHLOROPHENE helps prevent infections. Soothes baby's skin as it keeps bacteria count low. Also available without Hexachlorophene.

SPAL CONCENTRATE is a powerful liquid detergent. Useful as an all-purpose cleaning compound . . . for walls, woodwork, floors and on any surface not harmed by water alone. Dissolves oily dirt, makes cleaning easier. Produces suds quickly in any water.

SAN PHENO* X, powerful, non-specific hospital germicide with a phenol coefficient of 10. Economical to use, effective at dilution of 1:200 for many applications. Pleasant, safe for animate and inanimate objects. Highly active against Tubercle bacilli.

HI-SINE GERMICIDE, a new detergent-germicide with a built-in indicator, rapidly kills pathogenic bacteria. The need for a fresh solution is indicated when its rich amber color fades. Non-toxic, non-irritating. Cleans and disinfects many objects including floors, dishes, lavatories, instruments, etc.

INSTRU-SAN INSTRUMENT CLEANER saves time, simplifies instrument clean-up. Tenminute soak dissolves dried blood, plasma, serums and other incrustations. Dries filmfree and bright. Safe for glass, metal, rubber and plastics. Will not cause corrosion. CONTRAST* FLOOR POLISH prevents unsightly heel marks and eliminates the need for buffing. Safe to use on all floors except conductive. Simply apply Contrast and let it dry. The shine is automatic. No need to buff. Try Contrast Floor Polish on your toughest floor problem. It will not discolor even pure white floors and will not water spot. Economical, too. One gallon protects and beautifes approximately 2000 sq. ft.

OTHER HUNTINGTON WAXES. Manufactured under strict laboratory control and listed by Underwriters' Laboratories. C2C WAX for Conductive Floors protects and beautifies all conductive floors, helps maintain needed conductivity. COSMOLITE' ANTI-SLIP WAX contains colloidal silica that maintains a hard surface while preventing slips. WEATHERALL WAX retains luster for long periods under heavy, wet traffic. NEOSHINE' WAX is concentrated, gives longest wear.

CABINET-SAN® DEODORANT, in spray-type cans, is a highly concentrated aromatic deodorant which quickly removes objectionable odors when sprayed in rooms, corridors, cabinets and on fabrics. Big 16-ounce aerosol can is economical, easy to use and store. Also available in wick-type or plastic atomizer bottles.

silent Huntington Floor Machines are made in several types with either 16- or 20- inch brushes. Specially built for quiet, smooth operation. Sand, scrub, steel wool and buff. Guaranteed.

Write today for more information about these and many other Huntington products for every sanitation and maintenance need.



*Trade-mark Registered Huntington Laboratories, Limited

HUNTINGTON

.. where research leads to better products

HUNTINGTON LABORATORIES LIMITED . 86 Parliament Street . Toronto 2, Ontario

of Interest to Hospital Buyers

Administrative

Efficient, Glare-free Bed Lighting

Lite-a-Bed, a new versatile fixture for patient bed lighting, has been introduced by J. A. Wilson Lighting, Ltd.

Designed to provide efficient, glare-free hospital bed lighting, the Wilson Lite-a-Bed is available in five separate models in combination with optional extras, such as night lights, convenience outlets, examination lights and call lights.



Three different light distribution types are available. The 3ft. and 4ft. models provide fluorescent light up and down, or fluorescent light up and incandescent light down. The 15" model provides incandescent light up and down.

All models diffuse soft light throughout the room, providing concentrated down light for reading or occupational therapy at the same time.

In addition to being an ideal hospital bed light, the Lite-a-Bed is suitable for physician's offices, executive offices, nurses' quarters, floor stations, dentists' offices, and dormitories.

Write J. A. Wilson Lighting, Ltd., 280 Lakeshore Road, Toronto 14.

Boilers Raised Three Storeys for Installation

Boilers, which are usually lowered into position, had to be raised three storeys for installation at the new Regional General Hospital being built at Nanaimo, B.C. The first of two 53,000 lb. B&W water tube boilers were eased into position some 30 feet above ground.

The boilers, manufactured in Galt, Ont., by Babcock-Wilcox and Goldie-McCulloch, Ltd., are valued at more than \$30,000 each and were shipped fully assembled for immediate installation. The \$3 million hospital will open early next year.

New Line of Onan Engines Has Interchangeable Parts

Onan, division of Studebaker-Packard Corporation, have disclosed plans to introduce an entirely new concept in industrial engines and engine-driven generators "that will bring new advantages to consumers through marked improvements in manufacturing processes," according to C. W. Onan, president.

The new "J" line is a family of 12 basic engines that provides such unusual features as interchangeable parts, choice of gas, gasoline or Diesel fueling and water-cooled or air-cooled models—all fabricated from one basic set of tooling.



First units in the "J" series — which includes one, two and four-cylinder models ranging from three to 15 kilowatts — are available this fall, with the balance of the line scheduled for production by early spring.

According to Roy Mullin, vicepresident, marketing, "we expect these new engines and generators to open new markets we've never before been in a position to tap." Illustrated is Model J-60-a2-cylinder, overhead valve gasoline engine, now available.

Write for detailed literature to Onan, Division of Studebaker-Packard Corp., Minneapolis 14, Minn.

New Desk Thermostat Controls Temperature Environment

It is now possible for a person to dial his or her own comfort merely by reaching to a smartly styled desk thermostat conveniently located within arm's length. The new desk thermostat is ideally suited for executive offices and



conference rooms where it is important that temperature adjustment be both precise and handy in accommodating one or a few individuals or a large staff meeting.

Known as the Execustat, the instrument takes no more desk space than a conventional paper weight, yet is heavy enough to prevent accidental brushing or tipping. It is pneumatically operated and readily adapted to any space temperature control application. With a little advance planning, the Execustat can be easily relocated when desk locations or office requirements are changed.

The finish is egg white and light gray, with silver knob and trim. It is designed for heating and/or cooling, and has accuracy of ±1°F.

For literature and additional information contact The Powers Regulator Company of Canada, Ltd., Dept. PL, 15 Torbarrie Road, Downsview, Ontario.

Market Forge Food, Drink and Ice "Service Station"

Hospital administrators are enthusiastic about the latest Market (continued on page 110)



SAVE space...hours...dollars with Recordak Microfilming

If space is a problem in your hospital, keep your case histories, other medical and business records on microfilm. Takes as little as 1% of space needed for paper originals. Imagine keeping case histories by the thousand on a roll of film no larger than your hand! And these records are photo-accurate and tamper-proof . . . easy to refer to with a RECORDAK Film Reader.

If you are now losing hours on descriptive recordkeeping operations, microfilming can help you eliminate manual posting and transcribing on job after job. Just one example: you can process patients' bills 4 times faster by microfilming original requisitions . . . and sending them out with a simplified bill showing only total charges. This ends need for lengthy description. Many other "systems" applications possible.

If you want to save space, hours, and dollars in your hospital, look into the new RECORDAK



of Canada, Limited

SALES AND SERVICE POINTS!

Moncton • Quebec City • Montreal • Ottawa • Toronto • Hamilton London • Winnipeg • Regina • Calgary • Vancouver RELIANT 500 Microfilmer—fastest, most efficient microfilmer ever built. In one minute, this trim unit photographs up to 500 items and indexes them on the film for fast, easy reference.

Other Recordak models available for



MAIL COUPON TODAY

CH-10-61

RECORDAK of Canada, Limited 105 Carlton Street, Toronto 2, Ontario

Gentlemen: Send me further details on the new RECORDAK Reliant 500 Microfilmer.

Name_______Position____*

Hospital

Street
City Prov.

Sales and service points! Check local telephone YELLOW PAGE listings under "MICROFILMING" for telephone number and address.

Administrative

(continued from page 108)

Forge "Service Station". Having become familiar with the value and popularity of the Medi-Prep Medicine Station, they'll now find Market Forge's new companion piece, the Medi-Prep Nourishment and Ice Station, a similar helpful, time-saving and step-saving centralization station.



The new Medi-Prep Nourishment and Ice Station expedites convenient, efficient betweenmeals service and eliminates the danger of ice contamination.

This newest in a series of scientifically-designed hospital work stations proves very beneficial for better patient care. A new and unique feature is the built-in, sanitary, automatic ice maker, with a large storage bin and special dispenser, where there is no human contact with the manufacture of the ice and the deposit of the ice in patient's containers and water glasses.

For more complete information write Dept. GCN, the Market Forge Company, 25 Garvey Street, Everett 49, Mass.

The K-pad Provides Effective Substitute for Ice Packs

The aquamatic K-pad designed and developed by Gorman-Rupp Industries, Inc. in Bellville, Ohio, which provides greater safety and comfort for patients together with a saving of valuable time for the nurses in heat applications, now expands its application into a more convenient and efficient method of patient cooling than that afforded by ice packs.

The K-kooler, a new accessory for the famous aquamatic K-pad, extends the range of K-pad applications into cold therapy. It has been found to be extremely beneficial to patients suffering from swelling, fever, after effects of oral surgery, tonsillectomies, et cetera — wherever cold therapy is desired.

The K-kooler is a sturdy, easily cleaned, four-gallon capacity container which is well insulated. Finished in an attractive shade of green Epoxy enamel, the K kooler is equipped with five feet of extension tubing to be used between the K-1 Control Unit and the K-kooler.



The K-kooler is being introduced this autumn through Fisher & Burpe Company Limited, distributors in Canada for Gorman-Rupp Industries.

New Dispenser Announced by Minnesota Mining

Wide acceptance and continued requests from both consumer and distributor levels have prompted Minnesota Mining and Manufacturing of Canada Limited to make its Scotch Brand C-21 White Dispenser a regular item in its surgical and hospital products line.

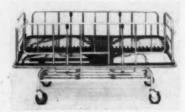


This smart looking dispenser comes complete with medical decal and 3" diameter white tape drum for dispensing Scotch Brand Hospital Autoclave Tapes No. 222 and No. 224. It is now available through Scotch Brand surgical products distributors.

For further information on the C-21 White Dispenser, write to the Tape and Allied Products Division of Minnesota Mining and Manufacturing of Canada Limited, Post Office Box 757, London, Ontario.

Eaton's Multi-Purpose Bed is Now Available

The Multi-Purpose Bed may be used as a recovery bed, labour and delivery bed, eye bed and intensive care bed.



Its overall size is 36" x 84" and the sleeping surface is 30" x 77". It is equipped with full Trendelenburg medical spring and there is a storage rack under the bed for the purpose of transporting oxygen, blankets and necessary utensils.

This bed is also equipped with full length safety sides and has complete rubber bumper protection. The bed is mounted on either 6" or 8" anti-static heavy duty locking casters.

For full details write The T. Eaton Co. Limited, Contract Sales Office, College St., Toronto, Ont.

D. B. Germicidal Detergent is New Dustbane Product

An entirely new product for hospital and institutional maintenance, D. B. Germicidal Detergent actually cleans as it disinfects.

D. B. Germicidal Detergent is a phenolic type germicide in combination with a highly effective, freerinsing, soil suspending, buffered cleaning compound. Balanced to provide maximum germicidal action and efficient cleaning ability, Germicidal Detergent reduces the cleaning and disinfecting processes to one efficient, labour-saving operation.

A minimum phenol coefficient of 6.0 (Staph-aureus) assures maximum germicidal action even in extreme dilution strength, D. B. Germicidal Detergent has been formulated by Dustbane chemists to provide hospitals and institutions with a labour-saving combination of a fast acting and efficient ger-

(continued on page 114)

For TIME-SAVING HOSPITAL use...

ONE-STEP PREP



An efficient, economically-priced, safe enema requiring far less time than outmoded procedures, FLEET ENEMA avoids the ordeal of injecting large quantities of fluid into the bowel.

Just one second of prep time needed... with the modern FLEET ENEMA! Once the full-length protective cover has been removed and the prelubricated 2-inch rectal tube has been inserted, simple manual pressure does the rest. And after the enema — no scrubbing, no sterilization, no setting up for re-use. The complete FLEET ENEMA unit is simply discarded!

Left colon catharsis can be achieved in two to five minutes without causing pain or spasm, while affording the same cleansing efficacy as the usual enema of one or two pints. Reverse flow and leakage are prevented and a comfortable flow rate assured by the construction of the anatomically correct plastic tube.

Plastic "squeeze-bottles" of $4\frac{1}{2}$ fluid ounces, with prelubricated tip.

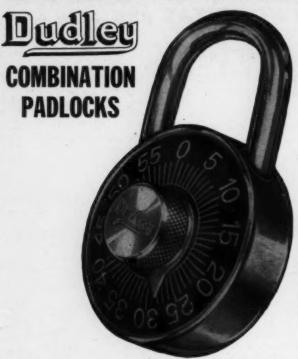


P.O. BOX 4006 TERMINAL "A" TORONTO 1, ONT. P.O. BOX 247 MONTREAL 3, QUE. P.O. BOX 340 CALGARY, ALTA.

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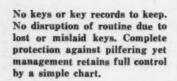
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FOR LOCKER PROTECTION Hospital Dietitians:



Known and trusted since schooldays by every

Nurse and Doctor



THESE LEADING HOSPITALS USE DUDLEY LOCKS

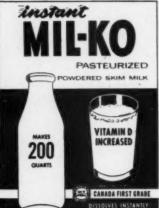
Holy Cross Hospital, Calgary Women's College Hospital, Toronto Ontario Cancer Clinic (Princess Margaret Hospital) Ontario Workmen's Compensation Hospital and Rehabilitation Centre Downsview, Toronto Saint John N.B. General Royal Edward Laurentian, Montreal New Mount Sinai, Toronto London General, London Vancouver General, Vancouver



UNITED-CARR FASTENER CO. OF CANADA LTD., TORONTO, CANADA

REDUCE MILK COSTS





The new 15 and 50 lb. sizes of INSTANT MIL-KO bring the price down to less than 6c a quart

HERE'S HOW TO REDUCE YOUR MILK COSTS

The new 15 and 50 lb. institutional sizes of INSTANT MIL-KO now bring the price down to less than 6c a quart.

It's "crystallized" to dissolve instantly in cold water. A light stir is all that's needed.

High in nutrition too. Only the fat and water have been removed. An excellent dietary source of riboflavin, protein and calcium. A good dietary source of thiamin and Vitamin C. And it is also Vitamin D increased.

Delicious in flavor and high in nutrition.

All this for less than 6c a quart!

The new 15 and 50 lb. sizes are now available across Canada. Order from your wholesaler.

MIL-KO PRODUCTS LIMITED



For institutional recipes write Box 695, Hamilton, Ontario.

CANADIAN HOUSEWIVES HAVE BOUGHT MORE MIL-KO THAN ANY OTHER BRAND,

MIL-KO-100% OWNED AND OPERATED BY CANADIANS, KEEP CANADIANS WORKING-BUY CANADIAN.

GOOK-BUILT LAUNDRY MACHINES FO COIN-OPERATED, ATTENDED AND ON-PREMI



Vashetto

WITH AQUA-SURGE REVERSING WASH ACTION

Available in coin operated model with drop coin meter; also in manual models with dual wash cycles. All stainless steel cabinet and interior; 25-lb. capacity.

MODELS M3750 - T-3750

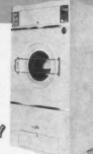
GAS HEATED DRYER

Underwriters' Laboratories listed, Dependable, fast performance. Leader in quality standards, yet competitively priced; up to 50-lbs. dry weight capacity.

THRIFTY BIFTY

GAS HEATED DRYER

nomy price and performance high dry efficiency. Quiet gear transmission; meter or timer controlled.





Washette TO FIT EVERY LAUNDRY

Available 25-50-75-100 pound capacities, manual or automatic controls, pedestal and cabinet models, including 25-lb. Twin. Features Cook One-Dial or Keymatic controls, with or without electric supply injector.

Fully automatic Coin - Operated WASHETTE, regular reversing wash action, heavy duty 25-lb. capacity in deluxe stainless steel cabinet.



Pedestal models WASH-ETTES S-25, S-50 excellent for quick service shirt laundries, cleaners, motels, hospitals, etc. High volume, high quality for commercial dependability.



Rugged, heavy-duty Models S-75 and S-100 WASHETTES for larger laundies, hospitals, etc., gives continuous, economical service, faster operation, with high quality work.





HE WORLD'S FINEST







Cook **EXTRACTORS**

Heavy duty extractors in stainless steel and available in 20" and 26" models . . . offer long life and trouble-free performance.



Convenient, fast installation for utilities. Comes complete; all steel construction. Includes water lines, soil pipe and electrical

Washette CABINET MODELS

Stainless steel satin finish cabinets, ideal for in-line installation in D-25, D-50 and Twin 25 Models. Same high quality performance of Washette S-models.



THE WASHETTE LINE GIVES YOU QUALITY, ECONOMY, DEPENDABILITY Matched Equipment for your laundry needs!

4156

COOK

For illustrated brochure and name of nearest distributor, write

MACHINERY CO., INC.

WASHERS . DRYERS . EXTRACTORS . WASHER-EXTRACTORS . P.E.P. 4301 S. Fitzhugh Ave. - Dallas 10, Texas - Phone HAmilton 1-2135



Administrative

(continued from page 110)

micide and a highly efficient cleaner. For complete information write Dustbane Mfg. Co. Limited, 88 Metcalfe Street, Ottawa.

Acrow Mobile Steel Filing Units Have Large Storage Capacity

These Acrow Open Vertical Steel Filing Units are each 36" wide x 12" deep x 72" high. The storage capacity of each unit is 1¾ times that of conventional 5-drawer filing cabinets, at approximately half the nominal cost of a 5-drawer filing cabinet.



Acrow units have recessed shelves with movable dividers at 1" centres. It is said that these units give more efficiency in reference requirements, and have an attractive over-all design.

Free consulting services and quotations are submitted without obligation. Write for full details to: Acrow (Canada) Ltd., 73 Chauncey Ave., Toronto 18, Ont.

Recordak Announces New Microfilm Reader-Printer

The Recordak Reader-Printer, a microfilm reader which makes paper prints of documents on microfilm with "push-button" ease, has been announced by Recordak Corporation. This versatile new unit operates with 16mm or 35mm film in roll form, in aperture cards, or in card-size film jackets.

The unit is fully automatic in operation. The operator pushes a button to make a photo-print of the microfilm record projected on the screen. Paper and chemical cost is about 9c per print. Quick reference to records on microfilm is made possible by simplicity of design which makes for fast and easy operation. Images are enlarged up to clear and sharp readability on the self-contained 11 x 11 inches screen.

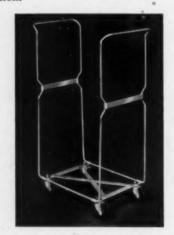
When a paper copy is desired, it can be ready for use within 45 seconds. A variety of lenses is available to provide prints up to 87 per cent of original size, irrespective of the reduction ratio at which the documents are microfilmed. Prints $8\frac{1}{2} \times 11$ inches are delivered cut to size, squee-gee dry, from roll paper contained within the reader. No darkroom is required. The unit can be operated and loaded under normal room lighting conditions.

Literature is available from Recordak of Canada Ltd., 105 Carleton St., Toronto 2, Ont.

New Laundry Bag Holder Featured by Hardie

This convenient bag holder is Cadmium plated and is of all steel construction. It is therefore easy to keep clean and hygienically safe.

G. A. Hardie & Co. have specially developed this bag holder as a measure towards reducing the incidence of cross infection. The smooth bright surfaces aid considerably in maintaining the equipment in a hygienic condition.



The spring steel uprights are easily compressed for hanging or removal of empty or filled bags by simply pushing on the conveniently placed knee bar while toes rest on bottom crossbar.

Standard Size (18" long, 12" wide, 36" high) will accommodate bags 17" to 22" in diameter and up to 40" long. Supplied complete with 2½" rubber swivel casters. Write: G. A. Hardie & Co., Ltd., 1093 Queen St. West, Toronto 3.

Patient Identification Posters Now Available

A series of colourful posters stressing the importance of positive patient identification are available on request from Hollister Limited, manufacturers of Indent-A-Band. The cartoon-style posters were designed to remind all hospital personnel to check patient identity before administering treatment or medication.

Various "tongue-in-check" situations depicted in the series are a humorous reminder of the serious business of proper patient identification.



For additional information and free copies of the posters, write to Hollister Limited, 160 Bay St., Toronto 1, Ont.

Picker Polaroid System Allows 10-Second Processing

The Picker Polaroid MD/RR System, with new Polaroid 3000-X Radiographic Packet, is a complete self-contained system for 10second processing of a positive radiographic image on paper requiring considerably reduced graphic packet is daylight-loaded into a special 10 x 12-inch cassette that fits regular holders and trays and is dry-processed in a portable processor. It produces a completely finished radiograph and does not need darkroom, solutions, drier or illuminator.

Using a high-speed intensifying screen, exposures for thick body sections are from ½ to 1/6 of the MAS required for conventional film radiography and 5 to 10 lower KV. Detail screen is recommended for extremities, using approximately ½ of conventional MAS. Technic chart is furnished with packets.

The Picker Polaroid System is greatly improved over previous Polaroid packets. Density range

(continued on page 116)

What every O.R. and Central Supply Nurse should know, about A·S·R SteriSharps blades

What are SteriSharps?

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They are sterile - packed surgical blades made from a special alloy of extremely hard stainless steel. Like all stainless-steel surgical instruments they will not rust or corrode in hospital use.



Aren't all sterile-packed blades made from stainless

No. Others are made from ordinary carbon steel which rusts, corrodes and dulls quickly when autoclaved or kept in solution.

Are SteriSharps blades sharper than carbon steel blades?

SteriSharps' imported high-chrome Swedish steel is hardened, tempered, ground and sharpened under process developed by A.S.R to give it a sharper, longer lasting cutting edge.

J. Can I autoclave the sealed SteriSharps packet?

Yes. Neither autoclaving nor dry-heat sterilizing harms the packet or the blade inside. This means you can include any number of SteriSharps packets on the instrument tray. The sterile nurse can then open blades as needed. And all unopened packets can be returned to stock.

Can I autoclave SteriSharps blades out of the packet?

Yes. Unlike carbon steel blades which blacken, rust and lose their edge when autoclaved, SteriSharps blades can be autoclaved repeatedly without damage. Thus, SteriSharps which have been opened but not used can be returned to stock. This eliminates blade waste. SteriSharps can be stored indefinitely without harm.

. How does A.S.R make sure that SteriSharps are 100% sterile?



A. SteriSharps are ultrasonically cleaned before packaging. The packets are sealed securely and are heatsterilized at a time-and-temperature cycle well above highest hospital requirements. Each lot is sampled twice, and blades are tested for sterility by A.S.R's own bacteriologists according to USP XV (revised). Each lot is also checked by an independent laboratory.

How can I be sure SteriSharps come to me 100% Sterile?

Test them in your own laboratory. We will be happy to send you a detailed description of our sterility testing methods.

Can SteriSharps be re-used?

After their work in the Operating Room, SteriSharps can be autoclaved and distributed to Pathology and other blade-using departments.

How do SteriSharps compare in cost with other sterile-packed blades?

SteriSharps cost less.

How do SteriSharps compare in cost with ordinary carbon steel blades?

SteriSharps do away with jars and solutions and eliminate blade waste. In addition, the greater durability of stainless steel means longer blade life. Surgeons report that during procedures where extensive cutting is required, one SteriSharps does the work of as many as six ordinary carbon steel blades. Hospitals using SteriSharps report dollar savings of 25% and more over conventional nonsterile carbon blades.

Do SteriSharps come in all standard sizes and fit all standard handles?

Yes. In addition, when you contract for SteriSharps, you will receive FREE as many stainless-steel dispensers as you need for your O.R. suite and other blade-using depart-



How can I find out more about SteriSharps?

Through our distributors: Casgrain & Charbonneau Ltd., 445 St. Lawrence Blvd., Montreal, Quebec-Fisher & Burpe, Division of: American Hospital Supply Corporation (Canada)

Limited - Montreal - Port Credit - Winnipeg -Edmonton - Vancouver - or write direct to: A.S.R. Hospital Division-Pal Blade Corp. Ltd., 2055 Desjardins Avenue, Montreal 4, P.Q.

Literature and samples for your evaluation available upon request.

narps... the <u>first</u> sterile, stainless-steel surgical blade

Administrative

(continued from page 114)

is, of course, limited by the fact that the radiograph is a reflection print, but within the useful range detail sharpness is comparable to conventional films.

Write for full particulars to Picker X-Ray Engineering Ltd., 100 Dresden Ave., Montreal 16, Quebec.

New Packaging for All Time Products

The Professional Tape Co., Riverside, Ill., pioneers in development and research of tape and labeling procedures to combat infectious effects such as hepatitis, staph and other diseases that attach themselves to laboratory and hospital personnel through self-inoculation, announces that its "Time" tapes and labels will be shipped and displayed in a new colourful package design.



The die-cut cover folds back to appealing trademark identification and product display. Contents, sizes and informative data are attractively displayed on the two-colour carton. The carton is square, in lieu of the original tube cartons, thus permitting simple storage as well as attractive point of purchase display for dealer use. A red and yellow colour scheme will be used for "Time" tapes and labels, and blue and white for TSI (Time Sterile tapes and labels. Indicator) Initial shipment of the new cartons is to begin on or about October 1, 1961.

Thermo-Fax Brand Paper Speeds Paper Work

A new method of printing up to 25 permanent bond-weight black on white copies from an original master has been announced by the Business Communications Division of Minnesota Mining and Manufacturing of Canada Limited.

The new Thermo-Fax Brand Systems Paper was designed to speed up and simplify paper work by producing multiple copies without the use of duplicating equipment or multiple carbons.

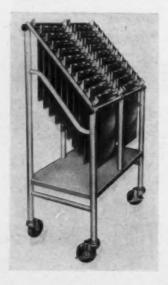
Systems Paper consists of two (2) parts—Type A and Type B. Type A is the original master and pink in colour. On this master one can print or write. It can be erased easily and is perfectly dry and clean to handle. It can be filed conveniently and used for additional copies at any later date should the need arise.

More information about this money-saving method of duplication is available by writing to the Business Communications Division of Minnesota Mining and Manufacturing of Canada Limited, Post Office Box 757, London, Ont.

Beam-Matic Chart Racks and Wheeled Carriers

To simplify patient charting, Beam Metal Specialties has a new line of Beam-Matic Chart Racks and Wheeled Carriers. Among the models are Swivel Racks which rotate 360° and are made for desk and floor styles; others may be hung on the wall or fastened through the desk top.

Outstanding features of the Wheeled Carrier shown, in addition to locking casters, is a silencer device that keeps the charts from rattling while carrier is in motion



All models are available for the two most popular size chart holders, 9" x 12" (H-10) and the longside hinged 12" x 10" (H-20). Construction is all aluminum, fully anodized.

Additional information is available from Beam Metal Specialties, Inc., 25-11 49th St., Long Island City 3, N.Y.

Food Service

Tulip Design is New Place Setting by Lily Cups

The Tulip design by Lily, a new place setting, is now used by many leading hospitals.

The ready acceptance of the new place setting by both administrative officials and professional staff members reflects the care which the manufacturer exercised in the development of both the design and colour combination of the new service. Before the stylized Tulip design was added to the Lily line, it was extensively researched among many of the foremost authorities in the hospital



field. They reported that the design and colour combination of the new place setting were fully compatible with all food and beverages; harmonious with every decor—modern as well as traditional.

The ultimate in a fine matched service, the new Tulip design by Lily plays the fashion-keyed colour combination of blue and green against pure bone white. The result is a food service which lends appetite appeal to any meal.

Write: Lily Cups Limited, 300 Danforth Rd., Toronto 6.

New Hobart Large Capacity Dishwashers

Two new large-capacity fourstage dishwashers — an 18-foot flight type and a 13½-foot circular system — have been introduced by The Hobart Manufacturing Company Limited.

(continued on page 118)



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Unchanging stability from first drop to last ... without waste or deterioration

Available from Canlab

These control serums of known values serve as an accurate check on entire procedures. No reconstitution is necessary. Use Dade liquid controls exactly as you would fresh, human serum or plasma.

LAB-TROL® and NEW PATHO-TROL

The first multipurpose chemistry controls came from Dade. Lab-Trol is the original control serum with 17 known values. Its 17 values cover the normal range. NEW Patho-Trol covers the abnormal range; its 17 values are consistent with the abnormal clinical picture.

Clinical Procedures—write today for your copy!

IODO-TROL

Known control serum for protein-bound iodine determinations, with values in the normal range. 20-360-Dade lado-Trol, pkg. of six 6 ml. vials...

NEW CHOLES-TROL

Known control serum for cholesterol determinations; eliminates pipetting difficulties often experienced with non-aqueous solutions. A stable solution of cholesterol, serum protein and water. 20-375-Dade Choles-Trol, pkg. of six 3.5 ml, vials..... Patho-Trol, lade-Trol, and Choles-Trol T.M. Dade Reagents, Inc.



CANADIAN LABORATORY SUPPLIES

Limited **VANCOUVER**

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EDMONTON

Food Service

(continued from page 116)

The Model FT-18 flight type unit features a specially-designed 6-foot centre section for washing and rinsing operations. This is one of the first multiple-tank dish machines ever built with a centre section less than 8 feet long.

The machine also has a 6-foot loading and scraping section and a 6-foot drying and unloading extension.



Recommended for use in kitchens serving up to 1,350 persons per meal, the unit is built of heavy gauge stainless steel.

The other new machine, the Model RM-86 Rack-O-Matic, is Hobart's first multiple-tank circular dishwashing system.

Designed to make the best use of limited kitchen space, it has a 22-inch re-circulating dish scraper and 64-inch section in which dishes are power-washed and power-rinsed, then receive a final fresh water sanitizing rinse.

Scotsman Super Cubers In New Designs

The new Scotsman Super Cubers are the SC-300 air-cooled and the SC-300W water-cooled models. Both units have a daily capacity of up to 300 lbs. of ice, and are available in either grey hammerloid (baked enamel) or stainless steel finish.

Model BH-650 bin is a new 650 lb. capacity horizontal bin, and may be used with any model of the SC-300 or SC-500.

Model SF-5F, the new Scotsman Super Flaker, produces up to 2,000 lbs, of crushed ice per day. Like the new cubers, the SF-5F is available in either grey hammerloid or stainless steel, and with either water-cooled or air-

cooled compressor. The SB-1000 bin has been re-designed for use with the SF-5F.

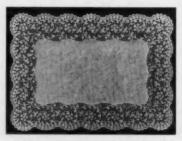
Materials, performance features and patented basic design of the newly added models adhere strictly to those of established Scotsman cubers and flakers. Emphasis continues to spotlight second-to-none reliability; easy, low-cost installation; and superior cubes or crushed ice.



Write to Queen Products Division, King-Seeley Thermos Co., Albert Lea, Minn.

Wood's Shandon Lace Embossed Place Mats

These attractive place mats enhance the appearance of table settings. They are richly embossed to complement the exquisite scalloped edged borders.



Made of super white, finest quality paper, they look and feel like fine linen. Size $10'' \times 14\frac{1}{4}''$.

Further information may be obtained from G. H. Wood & Company Limited — Head Office Toronto, or any G. H. Wood & Company branch across Canada.

Please mention the Canadian Hospital when writing to suppliers.

Pharmacy and Laboratory

Non-tip Hex Base Thermometer Sterilizing Jars

Mercer Glass Works Inc. has just announced the availability of a new line of thermometer sterilizing jars.

Featuring a specially designed base, hexagonal in shape and with extra heavy walls, the jars have an unusual stability. A clear, flint glass with high impact resistance has been used to fabricate 3 different sizes: 4" x 1", 4" x 2" and a screw cap type $4\frac{1}{2}$ " x $1\frac{1}{8}$.



Packing is either bulk or individually boxed with one dozen to shelf carton.

A complete descriptive bulletin is available from Mercer Glass Works Inc., 725 Broadway, New York 3, N.Y.

Fisher Dual-Unit Tissuematon Does Twice the Work

Newest model of the Fisher Tissuematon brings even greater speed, simplicity and flexibility to tissue-processing in the laboratory.



Called the Dual-Unit Tissuematon (patented), it has two independent programming dials that automatically carry tissues through both processing and staining cycles.

(continued on page 120)

recovery stretcher Bracket for intravenous pole Conductive rubber pad and Litter 29 %" x 78 %" overall Two braking and locking casters Nickel plated sliding sides Centre pivot for rapid tilting Blanket shelf Oxygen tank carrier Brackets for shoulder horns Bracket for foot board

IMPERIAL SURGICAL COMPANY

Pharmacy and Laboratory

(continued from page 118)

One dial controls a 24-hour cycle of dehydrating, fixing, infiltrating; the other controls a 1-hour staining cycle. Either cycle may have up to 12 different, successive stages of treatment with processing fluids. The operator can use any combination of media in the 12 stations, treat the tissues with these fluids in any sequence — all without attention.

Programming is ingeniously simple. Each dial has 11 small easy-to-place stops, set at intervals around its outer circumference. As the dial turns, each stop in turn comes to a microswitch, trips it, and actuates a mechanism that transfers the basket to the next station.

For full details write Fisher Scientific Ltd., 8505 Devonshire Rd., Montreal 9.

Lab Mixing Made Easy by New Clay-Adams Instrument

The mixing time for one typical laboratory procedure used to take 20 minutes. It can be done now in only 11 seconds with the Adams Cyclo-Mixer, a new labour-saving device that works miracles in the laboratory.



Cyclo-Mixers mix liquids or dissolve solids in test tubes or other small laboratory containers rapidly, easily, and completely. They do away with fatiguing and timeconsuming hand-mixing and eliminate possible contamination of specimen or operator from fingercapping or stirring rods.

Cyclo-Mixers, distributed by Clay-Adams, Inc. (New York 10, N.Y.), are available in three models: single-unit, two-unit, and four-unit. The single-unit Cyclo-Mixer is particularly useful for quick mixing of liquids of different densities, preparing liquid emulsions, dislodging sediments from centrifuge tubes, dissolving solids of low solubility, and agitation of micro test tubes. The single-unit model accommodates containers of various shapes and sizes - from 0.25 microchemistry tubes to 40-mm, diameter tubes and flasks.

It is compact and easily portable. When used in conjunction with the unique Clay-Adams Foot Switch, it leaves both the operator's hands free for holding tubes or flasks.

Three New Attachments For Wild Microscopes

Wild of Canada, Ltd, Ottawa, have added three new attachments for their microscopes.



The ribbon filament lamp, absorbing 180 w at 6 v, radiates a luminous flux which is about five times greater than the one created by a low voltage microscope lamp. For working with the ribbon filament lamp, a special supply unit calculated for 176 va is available which allows to work, even for short time, with over-voltage.

The advantage of the Wild Drawing Tube is that it enables the microscope technician to work comfortably and in his customary way. He need not give up the binocular inclined tube; his body position is physically favourable and rules out undue tiredness, even after prolonged periods of work. There is no need

to darken the working area, as was the case with the projecting devices.

Fluorescence microscopy is practically unmatched by any other known method for the purpose of achieving colour reactions that often warrant direct conclusions pertaining to the biological or chemical properties of the preparations. The techniques and equipment are now indeed so reliable that a broader utilization of fluorescence microscopy in daily practice and routine use is only a matter of time. This is all the more so since there is practically no area of blue and ultra-violet light fluorescence microscopy in which more rational and more consistently successful techniques are not being developed.

Increased Versatility in Liquid Scintillation Counting

Important changes in its line of Tri-Carb Liquid Scintillation Spectrometers have been announced by Packard Instrument Company. The changes include not only revisions in the operation of the instrument itself, but a broadening of the line as well. The Tri-Carb Spectrometer is used in the counting and analysis of radioisotope tracers in chemical and biological research.

The new line of instruments includes models for both semi-automatic and automatic sample changing, and provides for either refrigerated or non-refrigerated operation. The Tri-Carb Spectrometer is fully transistorized, and cabinets have been made more compact to reduce space required in the laboratory.



For more complete information request Bulletin AD-1002 from Packard Instrument Co., Dept. CO, P.O. Box 428, La Grange, Illinois.

(continued on page 124)

Hospital safe floor!



STATIC-PROOF...reduces explosion hazards!

Static-proof Amtico Conductive Vinyl Tile makes the safest hospital floor you can possibly specify.

It dramatically slashes the tragic accident potential of electro-static discharge in operating rooms, anaesthetizing areas, delivery rooms. It has the Underwriters Laboratories approval, fully meets the requirements of the National Board of Fire Underwriters and the National Fire Protection Association.

Simple mopping and buffing keep Amtico Conductive Vinyl Tile clean and bright in all four terrazzo design color combinations. This flooring muffles noise and provides resilient, cushioned comfort underfoot. It withstands years of toughest wear, and resists grease, acids and alkalis.

When it comes to flooring other hospital areas, remember that leading consumer research organizations rate Amtico Permalife Vinyl first among all-vinyls. You can choose from more than 200 handsome colors and designs. Also renowned for long-lasting beauty, comfort and quality are Amtico's complete lines of Vinyl Asbestos, Asphalt and Rubber floorings.

Ask your Amtico distributor or send coupon for FREE samples and information.



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STERNE

specialists in physiotherapy and rehabilitation apparatus

Sterne Equipment Company Limited specializes in the manufacture of physiotherapy and rehabilitation apparatus. For over 40 years, their ruggedly-built Canadian-made equipment and outstanding service have kept satisfied customers throughout Canada

Full Factory Service available on all equipment.

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Sterne Ten Pulse Stimulators
Sterne Low Volt Generators
Sterne Deep Therapy Lamps
Sterne Intermittent Traction Apparatus
Sterne Pulley Plinths
Adjustable Plinths, Standard Plinths,
Wall bars, Parallel bars, Shoulder
Wheels, Pronation and Supination
Apparatus, Traction Apparatus,
Walkers, Wheelchairs, Gym mats,
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Solarium on the roof of children's hospital

The value of sunshine and living plants to convalescents and shutins both from a physical and psychological standpoint has long been recognized by medical authorities. Solariums and greenhouses where such therapy can be carried on throughout the year have become an important part of hospitals and institutions throughout the Dominion. At hospitals, they are furnished comfortably for use by the various patients. In psychiatric and neurological institutions, homes for the aged etc., standard growing houses are frequently used.

Call on us for anything needed in glass structures. We manufacture a wide variety of standard styles and types as well as "custom" designs to meet the requirements and conditions of the individual. Problems particular to hospital and institutional construction are a specialty with us. Glad to collaborate with plans, specifications, and quotations.

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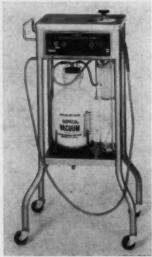
(continued from page 120)

Gomco Introduces Thermotic Drainage Pump

Gomeo Surgical Manufacturing Corp. is marketing a new Thermotic Drainage Pump that speeds and simplifies flushing and drain-

age techniques.

Featuring a compact, built-in flushing attachment, the new No. 764 combination unit delivers 35 to 50 cc of water or saline solution at each stroke of the manually-operated plunger. Drainage tubes are rinsed clean and clear without the use of hand syringes and without disconnecting drainage tubes from the Thermotic Pump.



The dependable, attention-free Thermotic Pump completes the flushing drainage cycle by gently and automatically withdrawing

the flushing solution.

Hospital tested and approved, Gomco No. 764 Thermetic Drainage units are designed for procedures requiring suctions as mild as 120 mm or 90 mm mercury. The stand, occupying only one square foot of floor space, measures 13" wide, 9½" deep, and 33" high. Baked Lumitone finish, Formica top, chrome-plated fittings, and overflow protection are standard equipment. A 550 ml glass reservoir is provided for the flushing attachment.

For complete details, write Gomco Surgical Manufacturing Corp., 828 E. Ferry Street, Buffalo 11, New York.

Ilford Introduces Fast Tungstate Screens

Resulting from over 35 years of Ilford experience in manufacturing high quality intensifying screens, Ilford Limited now have available fast Tungstate Screens. These screens obtain twice the speed of "standard" screens at all kilo-voltages from 40 to 150 KV.

Due to unusually fine grain size, definition is higher than that of many screens with half the speed. A specially compounded coating dramatically reduces the incidence of static induced by unloading cassettes. The useful life of these screens has been substantially extended by their tough stain and abrasion-resistant surface.

For further information write the Canadian representative, W. E. Booth Company Limited, 12 Mercer St., Toronto 2B, Ontario.

Milner Combination Blood Bank and Freezer

An addition to the standard Milner Blood Bank Model MBB-280-SC, having a capacity of 280 only 500-cc blood bottles, and Model MBB-175-SC-DT, having a capacity of 175 only 500-cc blood bottles, is the new Dual-Temperature Blood Bank Model MBB-105-SC-DT with a capacity of 105 only 500-cc blood bottles. It also has a freezer compartment having a gross volume of 7.4 cu. ft. in three pull-out drawers maintained at a temperature of —23° C (—10° F).



The Dual-Temperature model has been developed and introduced for the use in blood banks

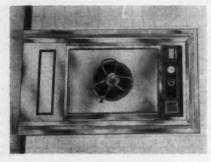
where the technician will also have available freezer storage space for sera, which eliminates the necessity of using freezer space in some other cabinet in the hospital, or going to the expense of buying a freezer for this type of sera.

The Dual-Temperature Blood Bank, as well as the standard Blood Banks, have, as part of their standard equipment, a 7-day recording thermometer and safety alarms which are independently operated from the normal power source in hospitals, for the protection of the contents of the refrigerator or freezer at all times.

Write: The Edward Milner Co., Ltd., Box 250, Toronto 16.

Vacamatic Bulk Sterilizer Newly Designed

A newly designed "Vacamatic" Bulk Sterilizer, which exceeds the output of three ordinary sterilizers, has been announced by the American Sterilizer Company of Erie, Pa.



It is designed for central service to meet increasing sterile supply requirements, higher operating costs and space restrictions. Vacamatic permits ultrashort exposure periods for even dense packs through the use of a new design concept utilizing controlled vacuum, fully automated cycling and 275°F. chamber temperature.

Speed and operator convenience are greatly increased by a fully automated electronic control. The operator merely turns the selector to the type of load to be processed, presses the "Start" button and returns on signal to press the "Stop" button. A positive "electronic brain" does all the thinking to guide the load through the full sterilizing cycle. Recording charts are changed only once every two weeks.

(continued on page 126)



BRITISH OXYGEN SOLVES

hospital pipeline installation problems...

In this instance, British Oxygen experts cooperated with one of Canada's leading hospital architects on the piping system for a Toronto hospital.

BOC experts were able to augment this talented architect's ability by supplying all the technical and product information he required to bring him up-to-date on current innovations and research developments. They supplied him with actual "on-the-job" assistance throughout the entire construction period. They put the entire facilities and know-how of British Oxygen at his disposal for this important installation. Designing and supplying hospital pipeline systems is just one of the many services offered by the BOC

Designing and supplying hospital pipeline systems is just one of the many services offered by the BOC Medical Division. You will also find a complete line of world-renowned anaesthetic and oxygen therapy equipment, BOC medical gases, and, of course, Canada's most thoroughly trained corps of service technicians.

For any information or advice, simply contact your British Oxygen Representative.



BRITISH OXYGEN CANADA limited

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Supplying Medical and Industrial Gases and Equipment Throughout the World.

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Professional Equipment

(continued from page 124)

A stainless steel door with fully concealed locking arms, accents the proved features of the safety lock door and a specially compounded door gasket which seals the chamber with a mere fingertip touch closing. A new handwheel design further improves the appearance of this handsome 24" x 36" x 30" sterilizer.

Used in conjunction with the Vacamatic is a newly designed loading car with quick-adjusting multiple shelves which permits the sterilizer to accept larger loads than routinely processed in ordinary 24" x 36" x 60" sterilizers.

Write the American Sterilizer Company, Erie, Pa., for fully illustrated brochure SC-303.

B.O.C. Distributor of Penn "600" Incubators

Uniformly controlled heat level throughout the infant compartment is essential, according to hospital specialists, for premature or full-term infants requiring the use of incubators, complete infant isolation during the incubator term, accurate high humidity and oxygen controls.



The Penn "600" Incubator, distributed in Canada by British Oxygen Canada Limited, has all these features plus unusually convenient facilities for infant care. The unit is provided with a heating element of low sheath temperature-per-square-inch characteristics. As a consequence, the many square inches of this

element allow for even distribution of adequate heat. According to B.O.C. medical division technicians, infant safety is assured as the maximum uncontrolled temperature in the infant compartment is 103° F. The 50-inch length heating cable is rated at 200 watts.

An important consideration in emergency deliveries is the fact that the Penn "600" quickly heats from nursery room temperature of 85° F. to 90° F. in the space of 20 minutes when the control is set at 'start'. B.O.C. points out that the heating unit is complemented by an efficient humidity systemup to 93 per cent relative humidity being maintained. This is the maximum saturation physically possible on an incubator. This has been made possible by virtue of the fact that there are 90 square inches of liberating surface in the humidity tray.

Head office of British Oxygen Canada Limited is at 355 Horner Avenue, Toronto 14, Ont.

Sklar Introduces Lemmon Sternal Approximator

This new instrument has been designed to aid in routine closure of the median sternotomy incision. It is especially useful in the cardiac surgeon's armamentarium. Once the sternum has been split and spread there is considerable resistance to reapproximation.

No suitable instrument is available to maintain the close approximation of the sternal bone edges required for satisfactory bone healing. The sharp curved prongs of the instrument are designed to embrace the sternum in the intercostal spaces without injury to the internal mammary or intercostal structures.



The instruments should be used in pairs, one usually being placed in the second intercostal interspace and the other placed in the 5th intercostal space. The control key with ratchet is turned up until there is close approximation of the bony edges of the sternum.

The instrument is obtainable in two sizes, the large for use in adult cases and the smaller for pediatric cases. Write: J. Sklar Mfg. Co., Long Island City, N.Y.

Ille Whirlpool in New Long Low Design

A new long and low Whirlpool, for treatment of legs and hips in a recumbent position, has been added to the distinct line of hydrotherapy tanks as manufactured by Ille Electric Corporation.

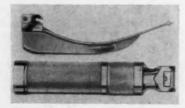


The outstanding features of the New Ille unit is a Long 66-inch tank length for adult horizontal leg treatment, a low 18-inch inside tank depth to provide for easy patient access into the tank.

The low tank makes it possible for a patient to enter and leave the tank without the use of a high chair. The new unit is available in both mobile and stationary types. Complete data may be had from: Ille Electric Corporation, Reach Road, Williamsport, Penna.

Welch Allyn's New Curved Laryngoscope Blade

A curved laryngoscope blade has been added to the Welch Allyn line which is new both in shape and material. It is believed to be the first such blade made entirely of stainless steel, which should far outlast previous chrome-plated brass blades. It is designated as No. 695, and is available in four sizes, from infant to large adult.



The new blade is the popular folding, hook-on type developed some years ago by Welch Allyn and may be used with all existing Welch Allyn hook-on battery

(continued on page 128)



This is Real Economy...

Pioneer makes Rollprufs of higher tensile strength latex to minimize cuts, snags and tears... controls uniformity of film thickness to eliminate weak spots... applies the extra band at the cuff to double the reinforcement against tearing... offers you a free glove-handling analysis to insure the most efficient operation of your present equipment.

the PIONEER Rubber Company Willard, Ohio, U.S.A.

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Professional Equipment

(continued from page 126)

handles or with a new handle having rechargeable batteries.

The advantages of the rechargeable handle are said to be that it eliminates battery replacements for years, adds to lamp life by preventing overvolting, and gives longer, more even illumination than handles using standard flashlight batteries of the same size. The battery is recharged by plugging into any 110 V. AC outlet. The new handle carries Wa No. 617. Write: Welch Allyn, Inc., Skaneateles Falls, N.Y.

Compact X-Ray Processor Introduced by Kodak

A new, compact Kodak X-Omat Processor for rapid processing of screen-type medical x-ray film—designed to meet the time, space, and capacity requirements of every radiologist's practice in hospital, office, or clinic—is announced by Canadian Kodak.

Kodak X-Omat Processor, Model M-4, is also adaptable as a "satellite" processing station serving emergency, surgery, neurology, and orthopaedics areas in large institutions.



The new unit uses only ten square feet of floor space, or about half the floor area covered by a hospital bed. It has the same seven-minute processing cycle as the larger M-3 X-Omat, which requires about 18 square feet of floor space. The smaller M-4 model uses the same roller transport system as the M-3 unit, and employs MX-413 chemicals de-

veloped by Kodak chemists especially for the X-Omat system.

Only the film-feeding end of the Model M-4 X-Omat, which is just 16 inches long, needs to be in the darkroom. The balance—34 inches long—is in a lighted area.

First shipments of the New Model M-4 are planned for early 1962. The larger Kodak X-Omat Processor, Model M-3, will continue to be available for those requiring its greater processing capacity.

New Olympus Stereoscopic Microscope

The Olympus model X is a research stereo microscope which stresses optical performance. At any point within the magnification range of 6.3X to 80X (or 160X if required), a perfect 3-dimensional image is produced.



Magnification selection is made particularly convenient by the large drum selector; as the drum is turned from one click position to the next, image magnification is varied accordingly.

A 40-watt base illuminator is standard equipment, providing incident light for transparent specimens. For use with opaque specimens, a low-voltage epi-lamp may be mounted on the head of the microscope.

Literature on Olympus microscopes may be obtained by contacting the Canadian agents: W. Carsen & Co. Ltd., 31 Scarsdale Rd., Don Mills, Ont.

New Hi-Temp Autoclave Sterilization Indicators

Hospitals equipped with high temperature, high speed autoclaves now have available the Aseptic-Thermo Indicator Company's Hi-Temp Indicators, especially designed to give visual assurance of successful sterilization by this type of critical, flash autoclaving.

Each Hi-Temp Indicator features a chemically impregnated circle which turns from purple to green to give assurance of the high pressure, emergency sterilization. The colour change is an accurate, time response to the several recognized methods of high temperature autoclaving.

This latest indicator was developed to fill a definite need, because many hospitals are now using high pressure, high speed autoclaves in addition to the regular type.



For generous test supplies of the new A.T.I. Hi-Temp Sterilization Indicators, along with prices and other information, write to The J. F. Hartz Company, Ltd., 32-34 Grenville St., Toronto 5.

New Electronic Instrument Locates Vital Heart Tissue

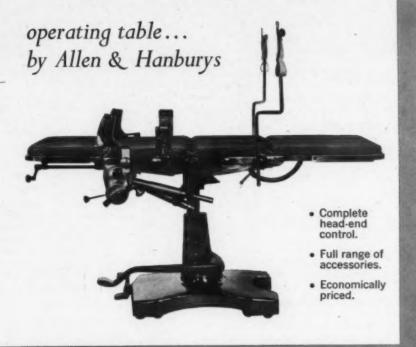
A simple method for precisely locating vital heart tissue — the "bundle of His" — during open heart surgery, and thus minimizing, if not eliminating, the chance of surgically induced heart block, has been developed by Medtronic, Inc., Minneapolis, Minnesota.

Known as the Medtronic Conduction System Locator, the instrument consists of an electronic depth probe — a long, pencil-like instrument affixed to a "tone box". When the probe is passed over the ventricular septum, the tone changes pitch as contact is made with the "bundle of His". By moving the probe back and forth across this area the tone changes trace the "bundle's" location with an accuracy of one millimeter.

The detection system is designed to work equally well on the arrested heart as on the beating heart. Earphones are available for use by the surgeon in concen-

(continued on page 130)

THE "MODEL MC"



TAWLITE STAINLESS STEEL HOLLOW-WARE



- Surgical Instruments for all branches of Surgery.
- Operating Room Equipment.
- "A & H" Knife Blades and Hypodermic Needles.
- Main Distributors of "Tawlite" British made Stainless Steelware and Stanley Cox Physiotherapy Equipment.

Modern operating tables are only part of the service "A & H" give to hospitals. As makers of quality surgical instruments and hospital equipment for over 200 years the skill and experience of many generations of craftsmen is established in the products of "A & H".



GLAXO-ALLENBURYS (Canada) Limited

Surgical Division

Weston • Ontario

Professional

Equipment

(continued from page 128)

trating specifically on the tone. A meter on the "tone box", which is used to zero the instrument before use, also indicates the changes in relative conductance of the tissue. Zeroing is done by placing the probe on tissue away from the "bundle" and adjusting zero indication on the meter.



The instrument utilizes a highly reliable transistor circuit, and uses a rechargeable battery.

Write to Canadian Biotronics Corporation Ltd., P.O. Box 744, Station B, Montreal 2.

Manlove Alliött High Vacuum Sterilizers

The United Kingdom for the past four years, it is claimed, has been the acknowledged world centre of concentrated research and development in the field of high pressure/high vacuum sterilization technique.



The 'Hi-Speed' range of high vacuum sterilizers by Manlove Alliott & Company Limited, of Nottingham, England, it is said, embodies all the results not only of these years of research, but of hundreds of field trials under full working conditions held in col-

laboration with all relevant branches of the medical profession.

Canadian hospital authorities will appreciate the fact that a Canadian installation has been working for a complete year with the same trouble-free efficiency as the hundreds of other similar installations throughout the world.

The Dalex Industries Limited, Toronto 15, will carry a full-scale model of the "Hi-Speed" and visitors can examine the unique "Selectromatic" automatic control—the control which "thinks"—and safeguards the patient.

Professional Supplies

New Red Medical Utility Gloves From Pioneer Rubber Company

Positive hand protection, tailored construction, and greater working comfort — all features essential to specific functions in the hospital, veterinarian and mortuary fields requiring the safeguarding of hands—are provided by the new U-36 Medical Utility Gloves just introduced by the Pioneer Rubber Company.



The red gloves feature a knitcotton lining permanently bonded to a rugged Pylox coating for their full 14½-inch length. The Pylox material, a Pioneer exclusive, provides maximum flexibility for working comfort and gives outstanding performance. It is exceptionally resistant to oils, greases, acids, and most chemicals and substances known to deteriorate ordinary rubber.

U-36 design and construction provide: insulation for the hands from hot and cold temperatures; complete liquid-tight protection—hands stay dry and free from irritating substances; long-lasting performance—the Pylox coating remains soft and flexible despite repeated contact with agents normally destructive to ordinary gloves; and safer-than-bare-hand grip on wet, slippery objects, thanks to an exclusive non-slip finish

The new red Pylox U-36 Medical Utility Gloves are available in small, medium and large sizes from supply houses featuring the Pioneer glove line or directly from The Pioneer Rubber Company, Willard, Ohio.

Becton, Dickinson Hypak Sterile Disposable Glass Syringe

B-D Hypak Sterile Disposable Syringes, according to the makers, are the only such products made of glass. Because glass represents a true extension of the manufacturer's package, parenteral medications retain their purity, potency and efficacy in Hypak.



B-D Hypak is available in 2 cc., 5 cc. and 10 cc. sizes — with or without needles — graduated in minims and cc's.

Write Becton, Dickinson Co. of Canada Ltd., Toronto 10, Ont.

Fenwal Announces New Blood-Pack Unit

Fenwal Laboratories, Morton Grove, Illinois, announces the introduction of the JD-3, the most recent addition to their line of Plastic Blood-Pack Systems. This new unit will facilitate the collection, processing and infusion of blood and blood components, by blood bank personnel.

The Blood-Pack unit consists of a 500-ml. primary pack containing 75 ml. of ACD Solution (USP Formula A) and two 300-ml. transfer packs, joined by connecting tubes. The entire system is manu-

(continued on page 132)

FOR YOUR PROTECTION

-in plastic as in glass



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All Deknatel KEL-F Plastic Paks are normally stored in 1% formaldehyde with fluorescein dye added. However, Deknatel KEL-F is completely impermeable to ALL concentrations of formaldehyde. Storage in Bard-Parker or other formaldehyde solutions is absolutely safe.

"... it is desirable to color the solution with a dye so that if the solution is aspirated into an ampoule, the discoloration will signal the fact that the contents are unsuitable for use."*

*Carl W. Walter, M.D., "Aseptic Treatment of Wounds" (New York: The Macmillan Company, 1954), P. 172



AN IMPORTANT STATEMENT RE: FORMALDEHYDE STERILIZATION OF PLASTIC

-from a feature article in America's foremost packaging magazine about Deknatel Plastic Pak:

". . . The halofluorocarbon formulation used by Deknatel is rated as <u>completely impermeable</u> (no weighable loss in 90 days or more) to water, acetic acid, ethyl alcohol, methyl alcohol, <u>formaldehyde</u>, hydrochloric acid and sodium hydroxide..."

From: "Enter Fluorocarbon Film", Modern Packaging Magazine, November 1957. Complete article available upon request.

For samples of Readi-Cut Silk, Surgical Gut, Needled Silk and Gut in the Deknatel Plastic Pak, write—

J. A. DEKNATEL & SON INC.

96-41 222 STREET, QUEENS VILLAGE 29, NEW YORK

Professional

Supplies

(continued from page 130)

factured of haemo-repellent plastic and includes a haemo-repellent, laminar flow, phlebotomy needle.

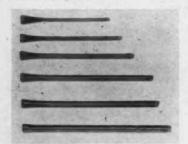
Sterile and pyrogen-free, this versatile unit permits closed system separation of red cells, white cells, plasma, and platelet concentrates. Individual components may be administered immediately, stored for future use or reconstituted. Whole blood or packed red cells may be divided into three subunits and kept for 21 days.



Complete information is available on request from Fenwal Laboratories, Morton Grove, Illinois.

Kant-Kink Tubes Designed For Difficult Cases

A new type of endotracheal tube has been introduced by Ohio Chemical. They are designed for the difficult case where extreme bends are required to accomplish intubation of the patient.



Identified as the Kant-Kink Endotracheal Tubes, they are made with flat stainless steel wire embedded in a thin latex rubber wall. The wire extends from the patient's end to the special funnel end in one continuous spiral. The tube will not kink no matter how extreme the angle and neither can

it be accidentally pulled off the connector. This is due to a compression fit between the knurled lock nut on the connector and the funnel shaped machine end of the tube.

For additional details write Ohio Chemical Canada Ltd. (A Division of Air Reduction Company, Inc.), 180 Duke St., Toronto 2, and request catalog Sheet No. 2498.

New Sterile Package Vi-Drape Surgical Film

Vi-Drape Surgical Film is now available sterile, ready for immediate use. The new pre-sterilized, sealed rolls are furnished in a choice of two sizes: 24" x 42", regular, and a smaller size, 24" x 18", packaged in boxes of one dozen rolls of a size. Sterile Vi-Drape Film, the plastic sheet used to isolate the patient's skin from the surgical wound and maintain an aseptic field during surgery, is adhered to the surgically prepared operative site and surrounding field with spray-on sterile Vi-Hesive Surgical Adherant.



The original Vi-Drape Surgical Film, packaged for autoclaving before use, is available in the regular size, 24" x 42". Both presterilized and non-sterile Vi-Drape Film are for one time use as an aid to improved asepsis and infection control.

Clinical literature, information on motion picture scheduling and price lists are available from surgical suppliers, or write to the manufacturers: Aeroplast Corporation, Station A—Box 1, Dayton, Ohio.

DePuy Introduces New Type Walking Heel

An entirely new concept in walking heels for ambulatory cast patients has been introduced by DePuy Manufacturing Co. Inc., Warsaw, Indiana. Known as the F.B. Cast Cushion this new walking heel is the result of extensive research, experimentation and clinical testing.

A principal feature of the F.B. Cast Cushion is that it is lower in height to provide greater patient comfort and reduce the possibility of a forced limp. It is a true walking aid, with a wide base for maximum stability.



Another feature of the F.B. Cast Cushion is that it is easily applied and can be anchored more securely than conventional walking heels. The deep criss-cross section spacing permits the plaster bandage to be applied in a normal figure-eight wrapping, simplified by the various angles available which make it a very natural procedure. Raised tips on the inner side set firmly in the cast to prevent lateral movement.

Disposable Identification Bracelet Lightweight and Comfortable

Busse Plastics is introducing a new, disposable vinyl plastic disposable identification bracelet that locks permanently without the use of special tools. The entire bracelet is made of soft, flexible, pigment-free, vinyl plastic which is lightweight and comfortable.



Each bracelet has a watertight compartment with a clear vinyl (continued on page 134)

WE HOPE IT WILL BE IMITATED

A VISIBLE VACUUM OPERATES THIS DRIP CHAMBER

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Ends chamber squeezing or tubing manipulation

A visible vacuum automatically establishes the proper fluid level in the drip chamber of a Saftisystem "28" I.V. set. No manipulation of tubing or drip chamber is required. You know the vacuum is there without having to listen for a hiss, because you can see the rising bubbles of filtered air in the flask as fluid is drawn into the drip chamber. Just two more examples of the excellent engineering that makes the Saftisystem "28" the safest, most practical of all I.V. systems.

Ask your Cutter representative to show you

SAFTISYSTEM "28"

CUTTER LABORATORIES INTERNATIONAL/106 11th Avenue, S.E., Calgary, Alberta

EARL H. MAYNARD, 1619 Weston Rd., Weston, Ontario STANDARD SURGICAL SUPPLY, LTD., 110 11th Ave., S.E., Calgary, Alberta STANDARD SURGICAL SUPPLY, LTD., 167 West 2nd Ave., Vancouver, B.C.

Professional Supplies

(continued from page 132)

plastic window to receive an identification card. The cards are provided with each bracelet.

These bracelets are adjustable to fit all sizes of wrists and are fitted with tamper-proof snap catches which are locked permanently with the press of a finger and are made to be removed only by destroying them. Two sizes are available: adult and children's sizes, both at a price of a few cents each.

Samples are available from Ross Disposable Hospital Products, 345 Renforth Ave., Toronto 18.

S-E Pack Dressing Marketed by Bauer & Black

The "pre-pack" is a dressing that you can open with complete confidence—it cannot touch torn, unsterile edges.

This revolutionary new pre-pack marketed by Bauer & Black opens without cutting or tearing the paper. It requires no change of the dressing procedure used in the C.S.R.'s, and costs no more than the ordinary pre-packaged dressing. This is the pre-pack that so many hospitals have asked for—it affords complete aseptic technique at a time asepsis is of such special concern in our hospitals.



The Curity S-E Pack is available in 4" x 4", 8 ply and 12 ply Gauze Sponges, and 4" x 4" and 4" x 3" Cover Sponges.

It incorporates all the outstanding savings in labour, time and money, plus total sterility.

Write for further particulars to Bauer & Black Div. of the Kendall Co. (Canada) Ltd., 6 Curity Ave., Toronto 16.

Sterilon's Disposable Prep Razor of Featherweight Plastic

Sterilon's latest addition to its line of I.P.S. items (Individual Patient Safety) is a Disposable Prep Razor moulded of featherweight plastic and assembled with a high-temper, double-edge blade.



Guarded corners and sides of shaving head minimize the chance of nicking the patient during prep procedure.

Packed sterile in a sealed plastic bag; ready to use; needs no preparation by central supply. Can be discarded after use. Write: Sterilon Corporation, 500 Northland Ave., Buffalo 11, N.Y.

Deknatel Humi-Sheath is New Packaging

A technical advance in the packaging of surgical gut, the new Deknatel Humi-Sheath's marked porocity, creates a reservoir of tubing fluid surrounding the gut after removal from the Pak. Evaporation is retarted; normal conditioning and strength are thus maintained for prolonged periods.



The Deknatel Humi-Sheath also serves as a ligature reel for surgical gut if required. It thus eliminates the needs for storing and sterilizing extraneous ligature holders.

Write: J. A. Deknatel & Son, Inc., Queens Village 29, Long Island, N.Y.

Announcements

Lederle to Expand Production of Antibiotics in Canada

The expansion of facilities to permit the complete Canadian production of broad spectrum antibiotics for human consumption has been announced by Cyanamid of Canada Limited through its president, B. F. Bowman.

The location of the new facilities will be at Niagara Falls, at the site of the company's present Welland plant. The program will raise to \$1½ million the Cyanamid antibiotic manufacturing investment in Canada. Production is scheduled for August, 1962.

"This will actually be the completion of a project initiated in 1958," said Mr. Bowman. "At that time we completed the engineering—plans, layout, et cetera—for the fermentation of our Lederle antibiotics in this country. We installed equipment, then, for the manufacture of the animal feed grade of Aureomycin and now we will go ahead with facilities for more highly refined products for human consumption."

Ralph B. Thomson, Manager of Cyanamid's Medical Products Department, explained that, to date, the company has been importing unrefined Aureomycin from the United States and refining it in the company's Montreal plant to the human grade as well as converting some to Achromycin. Also, it has been importing unrefined Declomycin and refining it in Montreal.

"Henceforth, it is planned that the importation of these products will cease and Aureomycin, Achromycin and Declomycin will be 100 per cent Canadian origin," said Mr. Thompson.

Du Bois Chemicals Moves to New Plant in Weston

Dubois Chemicals of Canada, Ltd., have moved their general offices and complete manufacturing facilities to their new Toronto plant on Kenhar Drive and Weston Road, Weston, Ontario, it has been announced by Louis Lerner, president of the detergent firm.

The new 28,000 square foot facility will serve the production needs for all institutional and industrial sanitation, maintenance, and processing compounds sold

(continued on page 136)

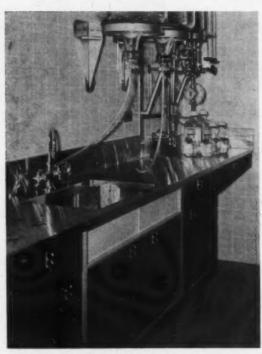
THE JOSEPH BRANT MEMORIAL HOSPITAL

Wilson Science Equipment is proud to have been associated in the construction of this hospital both as design consultants and later as contractors for all the furniture and capital equipment in the laboratory, pharmacy, nursing and C. S. R. areas.

The H. C. S. program illustrated features baked enamel steel cases in warm rich colours with satin walnut doors and drawers mounted on slim chromed steel legs. A feeling of warmth and lightness is thus created.



Part of the modern biochemistry laboratory.



Solution Room Illustrating New H. C. S. Furniture.

Wilson Science Equipment Limited also supply.

- Jewett Blood Banks
- Jewett Mortuaries
- Jewett Autopsy Tables
- M.S.E. centrifuges (clinical to major)
- M.S.E. Tissue Processors (Histokinette)
- Coulter Blood Cell Counters
- Hotpack Incubators, Ovens, Furnaces
- Sargent Polarographs
- Burrell Gas Chromatography equipment
- M.S.E. Hi-speed Centrifuges to 40,000 R.P.M.

When planning a new hospital or renovating, contact Wilson for complete consulting services for all laboratory, diagnostic and auxiliary treatment areas.

consultants, designers, suppliers of laboratory furniture, instruments and apparatus for industrial, educational and medical sciences.

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WILSON SCIENCE EQUIPMENT LIMITED

333 BERING AVENUE TORONTO 18 TELEPHONE BELMONT 9-4333 CABLE WILSELL

Announcements

(continued from page 134)

by the many DuBois representatives throughout the Dominion. Plant includes sufficient floor and mezzanine areas not only for the mixers, hoppers, and kettles immediately necessary, but there is ample space for expansion and the addition of more equipment. Space is also allocated for a dispenser shop, complete control and service laboratories, administrative and general offices, and modern maintenance and personnel facilities.

Mallinckrodt to Build New Plant at Pointe Claire

Mallinckrodt Chemical Works Limited has announced plans for the construction of new facilities on a four-acre site in Pointe Claire, Quebec, a suburb of Montreal. The announcement was made by Dr. D. S. Calder, vice president and general manager of the Canadian firm. There will be a capital outlay of a half-million dollars for the plant.

Designed to replace outmoded facilities in Montreal, the new plant will consolidate Mallinck-rodt's manufacturing, warehousing and administrative activities in a modern work area with more than 25,000 square feet of floor space.

Mallinckrodt will continue its sales office and warehouse in Toronto. The company markets a wide range of extremely fine chemicals for industrial, pharmaceutical, electronic and laboratory uses.

Shirlite to Market Goodrich Koroseal Line

The Shirlite Manufacturing Company, Kitchener, Ont., has recently concluded an agreement with the B. F. Goodrich Company of Canada Limited to merchandise their complete line of Koroseal Vinyl Wall Coverings. The Koroseal line is being introduced along with an expanded presentation of Shirlite Vinyl Wall Coverings.

Shirlite Vinyl Wall Coverings have long provided functional durability in countless major construction projects across Canada. They add ultra-modern design and three-dimensional decorative effects to the tried and tested Shirlite products.

Literature and samples of all types are available.

New Literature

Textbook on Medical Records in Nursing Homes

The first textbook covering all aspects of the use and keeping of medical records in nursing and convalescent homes is now available from the Physicians' Record Company.

The writer of Medical Records in Nursing Homes, Edna K. Huffman, is an internationally known authority on medical record practice. She emphasizes the value of adequate medical records in providing better patient care and in protecting the nursing home and its staff in the event of medicolegal action. Medical Records in Nursing Homes, 224 pages, 11 chapters, 60 illustrations, first edition, may be obtained from the Physicians' Record Company, 3000 South Ridgeland Avenue, Berwyn, Illinois. Write for descriptive Circular 1626.

Liquid Oxygen for Hospitals or Home Therapy

A liquid oxygen cylinder for oxygen therapy use both in hospital and at home, is described in a booklet available from Union Carbide Canada Limited, Linde Gases Division. The "Linde" LC-3 Liquid Oxygen Cylinder has a capacity of 3,000 cubic feet of oxygen, the equivalent of more than 12 "K" type highpressure cylinders.

Medium and smaller size hospitals in particular find this cylinder ideal for supplying their piping systems. The "Linde" LC-3 cylinder sharply reduces the need to constantly change cylinders as they become empty. One LC-3 cylinder should last the average patient five days. It can also be used at the bedside for supplying patients receiving oxygen by tent or other continuous methods.

Patients at home are ideally supplied by a "Linde" LC-3 cylinder because it cuts down on the number of deliveries necessary to keep them supplied with oxygen.

For free copies of this booklet, write to Union Carbide Canada Limited, Linde Gases Division, 123 Eglinton Avenue East, Department 500, Toronto 12, Ont. Ask for F-1258.

Please mention the Canadian Hospital when writing to advertisers.

Business

Personals

W. P. Saunders Transferred To Honeywell Montreal Office

John F. Bertram, Eastern region manager, Honeywell Controls Limited, has announced the transfer of Wallace P. Saunders from Halifax to the company's Montreal office



W. P. Saunders.

Mr. Saunders will be responsible for specific industrial division accounts in Eastern Canada. He will also be marketing the products of the company's electronic medical systems division. Mr. Saunders joined Honeywell in 1951 and has had broad experience in the industrial instrument field.

He is a graduate of Acadia University, Wolfville, N.S.

J. A. Wilson Lighting Makes Two Appointments

Two senior appointments were recently announced by Mr. Harry R. Yates, executive vice president of J. A. Wilson Lighting Ltd., Toronto.

Donald C. McCormack has been appointed director of research and product development to devote his full attention to the direction of an accelerated program of new products. Mr. McCormack joined the company in 1950, and prior to his new appointment, was manager of product development and engineering.

A past president of the Association of Canadian Industrial Designers, he is a member of the Illuminating Engineering Society and a founder member and director of the Association of Professional Industrial Designers of Ontario.

Mr. Hedley F. Davidson, P.Eng.,

(concluded on page 140)

G. A. Ingram Co. (Canada) Limited

DISTRIBUTORS OF "ANCHOR BRAND"

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STAINLESS STEEL NEEDLES

Highest Quality

AMERICAN MADE SURGEONS'

NEEDLES



"Anchor Brand" Stainless Steel Needles are Packed Six Needles to Each Package and are Sold Only in Purple Colored Packages as per illustration above. Samples on Request.

Surgical & Diagnostic Instruments
Sutures, Dressings
Orthopaedic Supplies & Equipment

Anaesthetic & Oxygen Therapy Equipment Electrosurgical & Physical Therapy

Equipment
Suction & Pressure Pumps
Metabalors & Electrocardiographs

etc.

Write For Free Catalogue

We would appreciate the opportunity of tendering for your requirements, and invite your inquiries.

G. A. Ingram Co. (Canada) Limited

MEDICAL ARTS BUILDING 1011 Ouellette Ave., Windsor, Ont.



Incubator rides safely on Bassick casters

This new incubator features unusually convenient facilities for infant care.

That's where the sturdy Bassick casters with wing type wheel brakes come in. For smooth safe rolling they just don't make a better caster. They're easy-swivelling and quiet. The brakes guard against any accidental or undesired rolling or moving. And Bassicks protect hospital floors, never mark or gouge them.



For hospital bods, specialized method of application now available.



Fermiscellaneous use, the widest range of sizes and types for all purposes.



For laundry carts, service trucks, etc. "Diamond-Arrow" casters provide easiest action,

Now with non-marking, stain-resistant rubber wheels.





OFFERS A COMPLETE LINE OF LAUNDRY EQUIPMENT & CHEMICALS

Featuring – high production, low productive labour costs and maintenance-free operation with

- UNIPRESS CO. INC.—The renowned ROTOMATICS, plus a complete line of laundry presses and shirt units. Unipress not only presses, it also IRONS.
 COMPARE!
- PELLERIN MILNOR CORP.—Combination Washer Extractors, open end Washers and Extractors.
 From every aspect, the finest "Combo" ("Combination Washer-Extractor") on the market.
 COMPARE!
- MANLOVE ALLIOTT & CO. LTD.—A superb flatwork ironer, with deep chests and high vacuum. The "Rolls Royce" of the ironers. Manloves Tri-Super Gap 3 roll ironer will produce equivalent to an 8 roll float-roll type. "Manlove" Sterilizers for every need. COMPARE!
- THOMAS BROADBENT & SONS LTD.— A flat bed folder, engineered to the highest standards to handle all your folding problems. From sheet folding to 5 lanes of smalls are available. COMPARE!
- T. L. SMITH CO.— Manufacturers of the famous Smith-Grantham tumbler for drying and/or conditioning. With positive moisture retention control.
- WICHITA PRECISION TOOL CO.—The incomparable PIL-O-BAR pillow renovating machine backed by bacteriological tests.

 COMPARE!

COUPLED WITH

An extensive Engineered Survey Service designed to cut your productive labour costs is available on request.

DALEX INDUSTRIES LTD.

100 Floral Parkway, P.O. Box 92, Toronto 15, Ontario.

Poli O-Bar

Economical Way To Sanitary, Comfortable Feather Pillows



Four Step Operation takes less than 4 minutes

See DALEX INDUSTRIES, Ltd. 100 Floral Parkway, Toronto, Ontario for more information

- Empty old feathers into unit.
- Start automatic timer and begin revitalizing cycle.
- Remove tick containing buoyant, fresh-smelling pure feathers and sew tick closed.

takes Up-date your institution's facilities by incorporating this service that provides fresh, sanitary, buoyant pillows for your guests. Let Dalex Industries, Ltd., explain how a Pil-O-Bar can be adapted to your operations.

Pil-O-Bar requires only $7\frac{1}{2}$ square feet of floor space (5' long by $1\frac{1}{2}$ ' deep and 4' high). Installed in seconds . . . requires only a 110-volt outlet. So easy to operate . . . any member of your staff can be trained in seconds.

WICHITA PRECISION TOOL CO., INC.

450 NORTH SENECA . WICHITA, KANSAS

Business

Personals

(concluded from page 136)

has been appointed manager of engineering for the company.

Mr. Davidson joins the company with an outstanding record in the field of illumination. For his major contributions he was elected a Fellow of the Illuminating Engineering Society in 1958.

A member of the research executive group of the Illuminating Engineering Research Institute, Mr. Davidson is active on several international lighting committees. He was, for many years prior to entering industry, in charge of the Illumination Section and Research Division for the Hydro-Electric Power Commission of Ontario.

Edwards Appoints B. F. Brown Toronto District Manager

Mr. R. C. Short, marketing manager, Edwards of Canada Limited, has announced the appointment of B. F. "Bud" Brown as Toronto district manager.



B. F. Brown.

A graduate in electrical engineering from the University of Toronto, Mr. Brown brings to Edwards 13 years of sales engineering experience in the electrical industry in Canada. He will direct the company's sales operation for the Oakville to Kingston territory, and Toronto to Sault Ste. Marie.

New Medical Director of Merck Sharp & Dohme

Dr. T. Airlie Brown, M.B., Ch.B. (Edin.), F.R.C.P.(C), has been appointed medical director of Merck Sharp & Dohme of Canada Limited.

A specialist in internal medicine, Dr. Brown is at present on the staff of the Montreal General Hospital and St. Mary's Hospital and is the consultant in medicine to the Catherine Booth Maternity Hospital. He has also held a McGill teaching appointment since 1955.

Dr. Brown has had wide experience in both clinical research and medical practice. His six years of post-graduate work included two years at Queen's University and a Hosmer teaching and research fellowship at McGill University.

Porto-Lift Announces New Canadian Representative

Porto-Lift Manufacturing Company, the originators of hydraulically controlled patient lifts, announces the appointment of Harry A. Geen, 17 Wythenshaw Wood, Scarborough, Ontario, as its eastern Canadian sales representative.

Mr. Geen has been associated with the hospital supply field for many years.

Porto-Lift Manufacturing Company, Higgins Lake, Michigan, markets its all chrome hydraulically controlled patient lifts throughout the world to hospitals,



H. A. Geen.

nursing homes and therapeutic supply houses. Porto-Lifts are mobile patient lifts which facilitate the movement of bed-patients and invalids, effortlessly and safely.

Most accidents are caused by ignorance, carelessness, selfishness or impatience, and all of these accidents can be prevented.—The Royal Bank of Canada Monthly Letter

J. C. N. Welch Joins Standard Hospital Supply

Standard Hospital Supply Ltd., 20 Belvia Rd., Toronto 14, have announced the appointment of Mr. J. C. N. (Jack) Welch in their sales division. Mr. Welch has been engaged in hospital selling since 1947 and is conversant with all phases of surgical requirements.

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J. C. N. Welch.

He comes to the company to continue his services in the Oakville, London, Niagara Peninsula and London areas. Mr. Welch is located in Hamilton.

Recommendations re Anaesthetics

Following is a verdict of coroner's jury on the death of a patient at the St. Joseph's Hospital, Kenora, Ont., which might be of interest to hospital personnel. The jurymen serving on the inquest concluded, after viewing the body, that the death was caused by extensive damage to the respiratory system of the patient as a result of an explosion of anaesthetic gasses initiated by an unknown cause.

The following recommendations were attached to the verdict:

1. Humidity should be controlled to lessen danger of static electricity and ventilation should be controlled to lessen the danger of accumulation of gasses in the operating room.

2. To reduce the incidence of static electricity in the operating room, the introduction of conductive equipment is recommended with periodic testing to maintain efficiency.

 It is recommended that the use of loose metal to metal contacts in equipment used in administration of anaesthetics be eliminated.

In addition to whole blood, the Canadian Red Cross Blood Transfusion Service provides vital blood fractions to Canadian hospitals.

No Wires Attached!

Those of us who are strongly influenced by news and reports in the daily press might well come to the conclusion that our world is populated largely by gangsters, profiteers, dictators, embezzlers and common thieves. In our complacency we may even regard as suspect those otherwise deserving souls who do not appear to know "which side is up". This attitude ignores, of course, the breath-taking achievements of men and women in medicine, research, manufacturing, marketing and other areas which extend beyond our comprehension.

Consider the aids to hearing! Almost everyone can remember when the head-piece and bulky amplifying batteries evoked our sympathy for the afflicted. Then came innovations including the eyeglass set with small batteries in the frames. (These were almost a complete camouflage — for the ladies at least - as the moulded earpiece could be covered with hair.) But wait! Doctors have been studying this problem further. We are now told that a hearing aid can be hidden in a tooth, making it possible for a person who is hardof-hearing to wear an aid without any tell-tale wires or gadgets showing at all. A tiny radio receiver is embedded in a hollow false tooth, and is connected to the nerve ends of an adjacent live tooth. Sound is transmitted to this receiver as radio waves from a small radio transmitter and microphone which may be carried in a pocket - or even worn on the wrist. The receiver relays the sound through the nerves to the ear.

In a recent issue of *The Financial Post*, a Canadian expert on hearing aids is quoted as saying that using a tooth for conducting sound waves is a good idea, and a spokesman for the school of dentistry at the University of Torontosays, "There is no reason why such a method would not work successfully."

The apparatus will become available when it has been approved by government agencies and professional bodies. Of course, it will be only for those who still have teeth with active nerves.—C.A.E.

The man at the next desk, about to enter the hospital, says he doesn't fear the needle, the knife, nor the surgeon's bill, but he flinches at the thought of the funny get-well cards.



She's Wearing the Nicest

NURSE'S CAPE

MADE-TO-MEASURE,

it was cut in one piece
from a choice of
Suedines, Velours, Serges, etc.
This ensures full flare,
proper draping, and an
even hemline.

EMBROIDERED INITIALS AND HOSPITAL INSIGNIA,

ticket pocket, nylon-lined collar are some extra features.

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Large and Small Hospitals (concluded from page 54)

smaller hospital, and there are many more opportunities for hospital equipment and supplies to come and go with all these people. In a large hospital with many subdepots of storage, it is not easily known when something is missing. The public seems to feel that the large institution is fair game for petty theft, or for storing something at home because the hospital temporarily does not need it. Loss

through theft can be very substantial. To control it requires a firm hand and adequate supervision and surveillance. It is easier to apply these controls in a smaller situation with a small inventory where daily orders can be more easily related to actual need.

There may be problems at the receiving end of the purchasing process if control methods are not carefully established, and if the personnel chosen for these jobs are not honest and reliable. It is not

difficult for the delivery man and the receiving clerk to sign for 120 lbs. of beef when only 100 are actually received by the hospital, and later each family enjoys a lovely 10-lb. roast. Where small quantities are involved, it is more difficult to deceive since the people using the product have a better idea of how much they have received.

Human nature is just as human in the large hospital as it is in the small one, and this being so, the flesh is more likely to be tempted when the gains are greatest. In the large hospital, orders for a single product may amount to many thousands of dollars, so there is much at stake for the salesman and his company. The people in purchasing are probably aware of the many courtesies which may be offered to bring a sale to a favourable conclusion—offers of this or that. None of us is free from temptation, and we may sin by acquiescence rather than design. Bribery is more likely to grow where the stakes are big and the supply budget is a large one.

Another problem found in any large institutión is the organization and maintenance of supervision and control in the various departments, and this applies also to the purchasing department. When the requirements of supervision increase, a large paper army is added to the observer corps. This results from the implementation of elaborate paper systems with multiple forms, more docu-mentation, additional records and storage of records, and finally, more reporting to other departments. There is no solution to this problem of more paper and more system except to keep worrying about it and whittling away at it.

In summary, purchasing in a large hospital is fundamentally the same process as it is in a small hospital. The economics, organization and management are directly affected by size and geography, and the problems which arise can usually be traced to size and specialization. The administrator in both the large and the small hospital looks to his purchasing agent to be bright, honest, and diligent; to know what is expected of the product, its quality, durability, et cetera; to do a bit of research and follow-up, periodically, after the supplies have gone out into the hospital. If this work is well done, purchasing is likely to be a lesser problem in a large unit than in a small one.



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- Tells at a glance whether pack has been through autoclave*
- · Holds firmly in high steam temperatures
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BEFORE AUTOCLAVING. Here is "Scotch" Brand Hospital Autoclave Tape No. 222 on a bundle ready for the autoclave. This new tape seals packs firmly in half the time required for pinning, tying or tucking.

AFTER AUTOCLAVING. Unmistakable diagonal markings appear to tell you the pack has been through the autoclave. The special inks used in "SCOTCH" Hospital Autoclave Tape cannot be accidentally activated by sunlight or radiator heat...only high steam temperatures can bring them out!



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11

Treatment Centre for the North

Clearwater Lake Hospital at The Pas, is providing first-class service for extended treatment patients in northern Manitoba with its facilities for the diagnosis and treatment of chronic respiratory diseases. The hospital is providing services for both short-stay as well as long-stay patients. As the hospital's services for extended treatment patients became better known to the medical profession and to the general public, more patients were admitted. Bed occupancy rose from 60 to 98

per cent. The installation of a modern physiotherapy unit has led to the referral of many hemiplegics and arthritic cases. An out-patient clinic in physical medicine was also established at the hospital recently. Further services have been planned for the hospital such as treatment facilities for chronic middle ear disease, chronic cardiac cases, arthritis and other physical impairments.

Although T.B. is decreasing among Indians and Eskimos, about 50 beds for this purpose are to

CHICAL PROPERTY

be retained because of the distance from other T.B. treatment centres in the South.

Is Purchasing a Profession? (concluded from page 61)

relations. He must gain the confidence of co-workers if he wants to obtain an inspired performance from them when he makes new proposals.

ANYONE CAN BUY IF he recognizes his responsibility to the organization as a whole. Purchasing has a good deal to contribute to each segment of hospital operation. It is not sufficient for the purchasing agent to wait to be told to do things. He is part of the team and must find out what he can do to assist the others, and then do it without prodding or coaxing.

These points do not exhaust, by any means, the qualifications that are embodied in today's definition of purchasing, but they are enough to establish the fact that purchasing, when carried on correctly, is worthy of recognition. The competent purchasing agent must be, in part, a researcher, lawyer, economist, diplomat, administrator, businessman and, above all, a human being. In less frightening terms, perhaps, we can sum it up by saying that anyone can buy if he is willing to learn to use the tools available to him. The principles and techniques involved are dealt with in numerous publications. Also, it is a unique characteristic of leaders in the purchasing field that they are anxious and ready to pass on their experience and knowledge to others. If they wish to elevate themselves to the status of professionals, then education must be the keynote: they must work hard to increase their knowledge, proficiency and effective service.

Anyone can buy, it is true, but not through instinct nor by virtue of the title of purchasing agent. Rather, anyone can buy because the science, detailed knowledge and sources of information are available to all.

A great box full of tools on a carpenter's bench is no guarantee that the man is a competent cabinet-maker. All the equipment in the world will be of no use if he does not study the best methods of using the tools and equipment available.

Anyone can buy better, and the skill with which the tools of purchasing are used will hasten the day when purchasing is indeed a profession.

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SAFETY ALARM SYSTEM



Should the temperature of the Blood Bank fall or rise dangerously, a bell rings and a light flashes to alert hospital personnel. Alarm

hospital personnel. Alarm signal may be installed at a remote location if desired. Standard on all cylindrical and counter-top models.

AUTOMATIC DUAL CONTROLS



Should the temperature control that cycles the unit fail to open, the second control AUTOMATICALLY operates the

Blood Bank within safe limits until the control is made operative again. Standard on all cylindrical and counter-top models.

TEMPERATURE RECORDER



7-day, spring-wound recorder gives permanent, continuous record of blood temperatures on 8-inch, easy-to-read charts. In the

event of fluctuation due to power failure, etc., pathologist can determine usefulness of blood affected. Hospital has accurate record to answer technical or legal questions. Optional on all cylindrical and counter-top models.

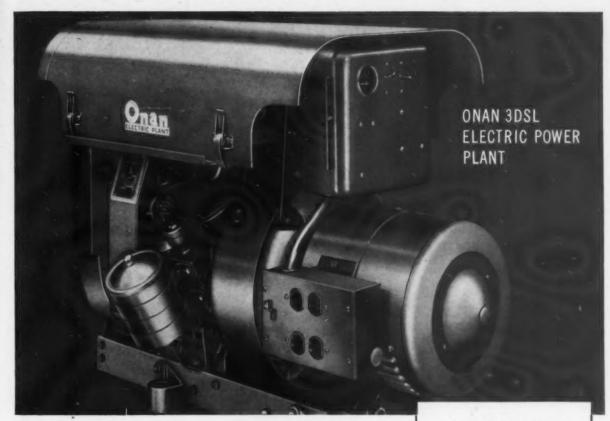
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... describing many additional features such as adjustable, revolving shelves free on request. You will also receive our new brochure showing Mortuary, Biological, and Milk Formula Refrigerators, Cracked Ice Bins and Autopsy Tables. Specify booklet No. 759B.





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You can put this versatile Onan 3DSL to work anywhere. This is the electric power plant for continuous heavy-duty service... wherever you need a dependable, independent power source.

The 3DSL, rated at 3000 watts, 60 cycle, is rugged . . . driven by a 6.5 hp Onan-built full diesel engine with plenty of reserve power for temporary overloads.

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OCTOBER, 1961

Maritime Conference (concluded from page 80)

Sydney, N.S.; and the professional secret—discussed by Rev. J. L. Lacey, P.P., Portugal Cove, Nfld. Monsignor Godin, chaplain of the Hôtel - Dieu de Saint - Joseph, Bathurst, N.B., acted as moderator.

Following the routine committee reports, time was taken for a review of hospital-government relations in the four provinces. Some of the changes which had occurred in the various plans since last year were described. The provinces were represented as follows: Sr. Catherine Gerard, Halifax, N.S.; Sr. Mary Ursula, Charlottetown, P.E.I.; Sr. Allain, Lameque, N.B.; and Sr. Mary Fabian, St. John's, Nfld.

On the last day of the convention Sr. Agnita Claire gave an excellent talk on the "Formation of the Hospital Sister". The closing session disposed of unfinished business and concluded with the induction of the new officers. After the close of the

meeting the delegates were guests for afternoon tea at St. Patrick's Mercy Home, and for dinner at St. Clare's Mercy Hospital. On the day following the convention a workshop was held on "The Implementation of an In-service Program" under the direction of Sr. Mary Emeline and Sr. Agnita Claire. During free time cars were available for the delegates to tour points of interest in the city and outlying areas.

The new officers for the 1961-63 term are: president - Sr. Mary Ruth, St. Joseph's Hospital, Saint John, N.B.; first vice-president-Sr. Catherine Gerard, S.C.H., Halifax Infirmary, Halifax, N.S.; second vice-president - Sr. Mary Ursula, C.S.M., Charlottetown Hospital, Charlottetown, P.E.I.; third vice-president - Sr. Mary Calasanctius, R.S.M., St. Clare's Mercy Hospital, St. John's, Nfld.; and secretary-treasurer-Sr. Mary Cyril, S.C.I.C., St. Joseph's Hospital, Saint John, N.B.

The members of the board are: Sr. Mary Fabian, R.S.M., past president of the Maritime Conference, St. John's, Nfld.; Sr. Marie Loyola, C.S.M., Antigonish, N.S.; Sr. Saulnier, R.H.S.J., Vallée-Lourdes, N.B.; Sr. Marie de Loyola, F.C.S.P., Moncton, N.B.; Sr. St. Joseph, R.H.S.J., Bathurst, N.B.; Sr. Cecile Therese, f.d.j., Dalhousie, N.B.; Sr. Mary Aneas, C.S.M., Sydney, N.S.; Dorothy Therese, S.C.H., North Sydney, N.S.; Sr. Rideout, R.H.S.J., Chatham, N.B.; Sr. Thomas Joseph, S.C.H., Halifax., N.S.; and Rev. J. B. Nearing, P.P., Sydney Mines, N.S.

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. now improved. HALIMIDE disinfectant free from objectionable odor, is a concentrate of low surface tension and excellent penetrating qualities. Perfect for inexpensive instrument disinfection, 1 oz. mixed with 1 gal. of water makes a stable - clear - non-corrosive - nonstaining solution. TUBERCULOCIDAL when diluted with alcohol. No anti-rust tablets to add -no need for frequent changing.





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an ideal instrument disinfecting solution for professional office use. It is rapid in destruction of commonly encountered vegetative bacteria-free from phenol (carbolic acid) and mercurials-not injurious to skin or tissue. It is used full strengthpleasant odor—its germicidal efficiency is not affected by soap.



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Paper Blankets for Hospitals

According to the literature, Swedish doctors have developed an effective new way of eradicating the deadly, drug-resistant bacteria which lurk in hospital blankets of every country today.

Their method was to make "the blankets of paper and periodically

burn the lot.

It appeared that a blanket consisting of 20 layers of soft crepe paper inside a linen cover was as warm and light as an eiderdown quilt. Studies had shown that a bed cover of this kind was easily handled by hospital staff and was durable enough for all practical requirements. When the patient left hospital, or at regular intervals in the case of long-stay occupants, the blanket was placed in a sealed paper bag and burnt.



Wabasso double-duty sheets are the only ones in Canada woven specifically for hospital use...

WABASSO weaves these heavy-quality sheets to stand up to the exceptionally hard wear and numerous launderings demanded in hospitals. But they're tightly woven of fine yarns to give a smooth to the touch surface so essential to patients. These made-in-Canada WABASSO sheets are also available in hospital green—through your local wholesaler or hospital supply house. The Wabasso Cotton Company Ltd.

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Total Patient Care

(concluded from page 64) isolation, all or part of it can be used for medical patients.

The new wing provides facilities for convalescent (some patients on self-help), long-term rehabilitative, and long-term chronic types of patients.

Lest we omit anyone, it should be noted that the paediatric and obstetric departments are full-time working units. It was mentioned earlier that the building included an in-patient psychiatric unit and here some day care out-patients are also treated.

These are the patient areas. All are co-ordinated to provide flexible movement of the individual from one level of care to another as indicated by his treatment. However, it should be noted that this ready transferability of patients can only be accomplished through the use of active diagnostic treatment services (laboratory, radiology, and occupational and physical therapy) in such a manner that the patient is guided through the various areas and observed as to his response to the treatment proffered.

From the foregoing, it would

Coming Events

Oct. 17-19—British Columbia Hospitals' Association Convention, Hotel Vancouver, Vancouver, B.C.

Oct. 23-25-Ontario Hospital Association, Royal York Hotel, Toronto, Ont.

Oct. 26-27—Catholic Hospital Association of Canada Ontario Conference, St. Michael's Hospital, Toronto, Ont.

Oct. 26-27—Housekeeping Institute sponsored by the O.H.A. in cooperation with the C.H.A., O.H.A. headquarters, Flemingdon Park, Toronto, Ont.

Dec. 3-6—Regional Institute on Hospital Accounting and Finances, sponsored by the American Association of Hospital Accountants, Hotel Kenmore, Boston, Mass.

appear that the consultants' recommendations as outlined some five years ago have now come to pass. None of this would be possible without the assistance of a well trained, interested medical staff, a "thinking group of hospital personnel", a far-sighted architectural firm and a conscientious dedicated board of governors.

New Hospital in New Guinea New Guinea's first permanent major district hospital was opened in Madang last month by the Territories Minister. The £62,000 hospital is a major step forward in the Territory's hospital program on which Australia has now spent more than £4 million. Madang Hospital, which will handle all routine surgical, general and obstetric cases, will be the centre of smaller hospitals radiating through Madang District down to village medical aid posts. The new hospital will also be a training centre for native nurses.





the new LONG and LOW

LONG: 66" Tank—a must for adult horizontal leg treatment.

LOW: 18" Depth — definitely necessary for easy placement of injured and elderly into tank. No high chair needed.

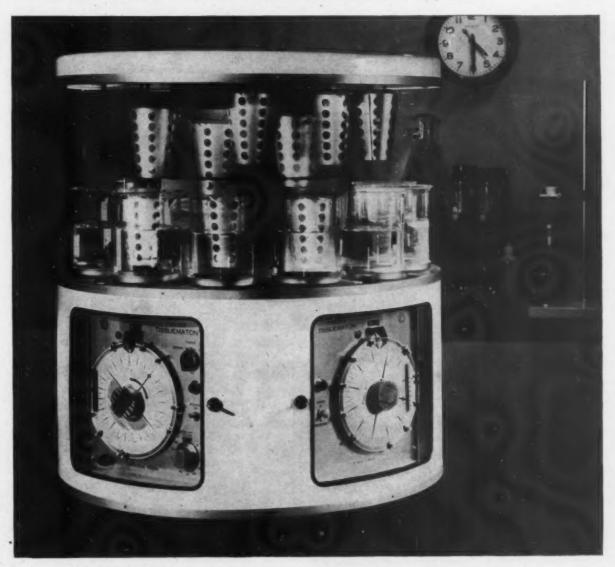
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STATIONARY: Standard Ille turbine ejector...over-the-rim sanitary water inlet...combination drain valve and overflow.

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4:30 SUNDAY MORNING ... NEW FISHER TISSUEMATON® HAS MONDAY'S TISSUES UNDER WAY Automatically ... on weekends, weekdays or week nights ... new, compact Fisher Dual-Unit Tissuematon can process as many as 88 specimens or stain 36 or more microscope slides. Just set two dials — adjustable stops permit up to 12 different, successive treatment stages of varying length in processing or staining cycles. Using delay timer, operator can postpone processing start-up for 60 hours. Get full details in free Bulletin FS-233. Call your nearest Fisher Sales-Service Centre or write Fisher Scientific Ltd., 8505 Devonshire Road, Montreal 9, Quebec.





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OCTOBER, 1961

Male Attendants' Graduation 1961



The Royal Victoria Hospital, Montreal, P.Q., has had a training program for male attendants since 1957, and to date 180 have graduated. This year they include attendants from the Montreal Neurological Institute and the Allan Memorial Institute where they had special training in psychiatry.

Seen in the picture are: front row: G. Lane, assistant supervisor of attendants; Dr. G. W. Lehman; Dr. J. Gilbert Turner, executive director; Judge Redmond Roche; T. M. Davison, supervisor of attendants; and F. Fairbairn, assistant supervisor of attendants. Second row: P. Kidd, E. Katsaros, S. Mountakis, J. Ioakimidis, E. Corbett, K. Diaka-george, P. Mountakis, J. Tsemes, C. Aifantis, J. Tetreault, H. Heinrich, N. Zafiracos, and L. Hardt, Third row: C. Siambilis, L. Carabatos, S. Gournakis, G. Potamianos, A. Theodonis, R. Layne, and E. Vlassis. Fourth row: N. Katselis, C. Spiliadis,

0

Martakis, G. Savvidis, Xiaphdciannopoulos, E. Hints, Michael, S. Giatras, and B. Makris. Fifth row: R. Anderson, S. Carlis, S. Plarinos, J. Kalaleos, G. Vogas, D. Michelakos, G. Manarolis, G. Pappas, G. Da Ponte, and P. Jacovos. Sixth row: C. Booth, J. Fanning, L. Szick, P. Grimard, D. Holder, J. Boyer and E. Maranda. Back row: J. Da Ponte, J. DeBrayne, W. Snow, B. Richards, H. Redman, F. Tanner, D. Starsmore, M. Lalancette, and B. Leduc.

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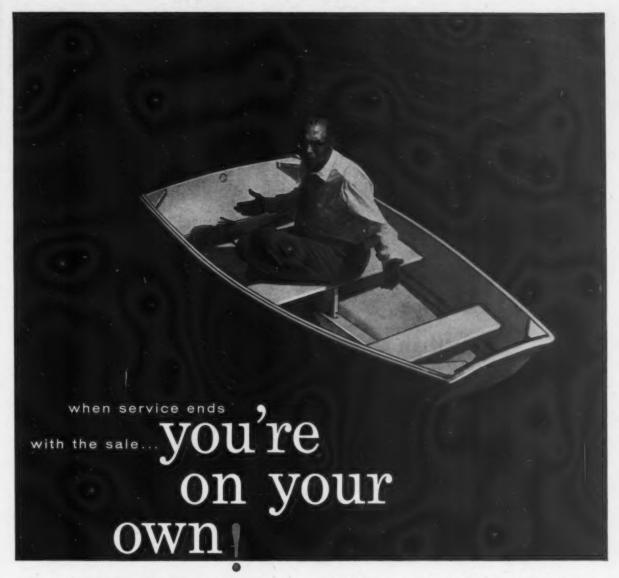
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The Hospital Pharmacist

The hospital pharmacist as head of an important professional department within the hospital is usually in a middle management position. Likewise, pharmacists can, and do, become presidents, owners of chains of stores or directors of hospitals. As a member of top or middle management, the pharmacist will be acting as an executive whether he realizes this or not. Although the individual may or

may not recognize that he is performing administrative work, he will be doing administration either well or poorly. Obviously, if the individual recognizes and accepts the administrative side of his rôle, the chances of his doing a good job are improved.

The hospital pharmacist holds office in top or middle management in a large, public or social organization. The pharmacist must pos-

sess many attributes in addition to skill in his basic profession. The pharmacist should expect, and it should be expected of him, that he will be able (1) to accept and use delegation of authority, responsibility and accountability; (2) to assume command of his unit whether it be the pharmacy or a larger segment of the hospital embracing more than one department or service. He must be able to give guidance in purchasing methods, stocking the pharmacy or other areas, dispensing and the hiring and firing of assistants and other help. In short, he must be able to take charge; (3) to plan, organize, direct and represent. He must perform these functions either for one department or, in some cases, for many departments or even for the whole hospital; (4) to communicate, not only upwards to a board of directors or to an administrator of the hospital, but also with his colleagues and downwards to his subordinates; (5) to advise the medical staff, the nursing staff, his subordinates and, by no means least, the administration and board of directors of the hospital; and (6) to work with people.

Some, or many, of these duties may seem far removed from the professional activities of a pharmacist. If one visualizes the pharmacist as an apothecary in his shop, they are indeed far removed. If, on the other hand, one thinks of the pharmacist in the hospital as a vital force, communicating with, advising and assisting a myriad of other professional and highly specialized persons; if one thinks of the professional pharmacist as a man who can plan, organize, direct and represent his professional activities, then the administrative rôles which have been portrayed here are truly a part of his professional existence.

From an address by A. L. Swanson, M.D., executive director, University Hospital, Saskatoon, Sask., given at the Canadian Conference of Pharmaceutical Faculties, August, 1960.

Side Effects

The Food and Drug Administration of the U.S.A. has instructed manufacturers to enclose in drug packages a statement on any harmful side effects the drug may have. A brochure containing complete information on the drug will be included in every shipment to doctors, druggists, and hospitals. Regulations become effective March 5, 1962.



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Correct balance reduces mechanical strain...

practically eliminates maintenance costs. Correct
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the premature infant can maintain his own constant body temperature indefinitely . . . the new

Infant Servo-Controller for the **Isolette**°

provides automatic body-temperature control until the natural thermoregulatory mechanism can mature and take over



With the new INFANT SERVO-CONTROLLER for the Isolette® the premature infant acts as his own thermostat. Changes in the baby's skin temperature control the on-off cycling of low-intensity infra-red lamps thus providing-

- gentle, radiant heat when demanded by a fall in the infant's skin temperature.
- minute-to-minute, stable control of even the tiniest infant's body temperature at any preset level within $\pm 0.5^{\circ}F$.
- utmost safety-instantaneous response to the temperature-sensing element, taped to the baby's abdomen, turns off the lamps the moment the preset body temperature is reached.

An electronic safety thermostat provides an additional safeguard to protect the infant. As soon as

the body temperature rises above the preset point, this secondary heat-sensing element turns off the lamps, sounds a buzzer and lights a red warning lamp.

The new Infant Servo-Controller is easy to operate. It can be factory-adapted to any ISOLETTE incubator, or you may purchase the new model C-77 Isolette with the Infant Servo-Controller already in place.

For additional information, phone collect from any point in the Dominion, or write



113 King St. E., Toronto 2, Ont.

Leaders in electronic research and engineering to serve medicine



provide optimal isolation and precise, constant, fully-automatic control of temperature, humidity and oxygen—factors vital for survival of premature infants.

See us at booth No. 104 during the Ontario Hospital Convention

Federal Grants

(concluded from page 90)

nursery, and to expand the dining area, laboratory and x-ray room. Fire escapes were re-adjusted to the fire marshal's specifications. An adequate pharmacy, examining room and separate minor operation and plaster room were also provided.

Research

The sum of \$12,300 has been awarded to the department of anaesthesia, Faculty of Medicine, University of Toronto, Ont., for research projects in anaesthesiology under the direction of Dr. R. A. Gordon. Equipment will be purchased for full-time research, and a clinical research laboratory will be set up in space provided by the Toronto General Hospital. Research will involve the study of basic physiological and pharmacological problems in their relationship to anaesthetic procedures, drugs and techniques in clinical situations.

A grant of \$9,300 will aid in research work on brain damage caused by phenylketonuria, to be carried out in the Department of Paediatrics, Queen's University, Kingston, Ont. The specific aim of

this research project is to try to define the circumstances in which high blood phenylalanine levels lead to brain damage. The work will be carried out under the supervision of Dr. M. W. Partington, assistant professor in the Department of Paediatrics.

Mental Health

The Board of Health, Oshawa, Ont., will receive \$12,750 to help in the establishment of a mental health clinic which is to be set up within buildings owned by the city. While this clinic will serve the general mental health needs of the community, it is anticipated that its program will place particular emphasis on assistance to children and their parents.

Victoria Hospital, London, Ont., will be granted \$17,343 for the maintenance and enlargement of in-patient and out-patient psychiatric services in the 52-bed psychiatric unit of the hospital. The grant will make it possible for the hospital to assume full responsibility in the administration and staffing of the psychiatric service, thus providing improved mental health treatment facilities in the London area.

A grant of \$30,650 will help with the operating costs of an outpatient mental health clinic for adults and children at the new Psycho-Social Centre in Valleyfield, Que. The Diocesan Charities of Valleyfield have already set up a family and child care service as well as a day school for the mentally retarded. The new mental health clinic will complement the existing facilities.

Training for Authorship

Anyone wishing to become a successful novelist should be glad of advice from Somerset Maugham: "I do not know a better training for a writer than to spend some years in the medical profession." That was what he did himself. His experience in the out-patient department of St. Thomas Hospital, London, yielded material for his first novel, Liza of Lambeth. Maugham qualified as a doctor but never practiced. Although a novel about his experiences as a medical student failed to achieve publication, and he turned to writing successful plays, yet his memories bothered him to the point where he wrote the autobiographical Of Human Bondage, which established his name.-The Globe and Mail.



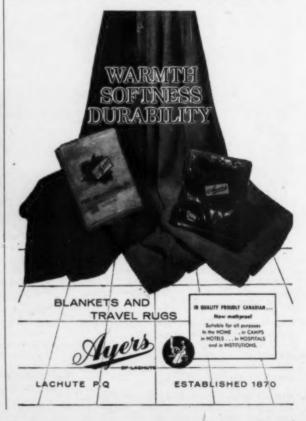
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(continued from page 32)

Dr. Bluestone Honoured by A.H.A.

E. Michael Bluestone, M.D., a pioneer in many aspects of hospital care, has been given the distinguished service award for 1961 by the American Hospital Association. Development of the home-care program is the foremost of the many accomplishments of Dr. Bluestone in improving patient care, which always comes first in his

considerations no matter what proposition is being discussed. He first planned and inaugurated this concept at Montefiore Hospital in New York where he was administrator at that time, using the hospital as a model. The concept has been followed by many hospitals in the United States, Canada and elsewhere.

In his capacity as hospital consultant at Montefiore Hospital and through his many articles, Dr. Bluestone continues to improve the welfare of the patient. Edith Fenton Retires from R.N.A.O.

Edith Fenton, field secretary and editor of the *News Bulletin* has retired after more than eleven years of service with the Registered Nurses' Association of Ontario.

Miss Fenton, a graduate of The Hospital for Sick Children, Toronto, and the public health nursing course, University of Toronto, had had a varied career in a number of centres before joining the association. During 16 years in Nova Scotia, she was active in the affairs of the Registered Nurses' Association of that province, being at one time its vice-president.

Her duties as field secretary took her to many parts of the province. She assisted at the organization of many of the chapters of the R.N.A.O. As editor of the News Bulletin, she saw the official organ of the association grow from a publication with a quarterly circulation of about 7,000 to its present bi-monthly circulation of 25,000.

Assistant Executive Secretary of R.N.A.O.

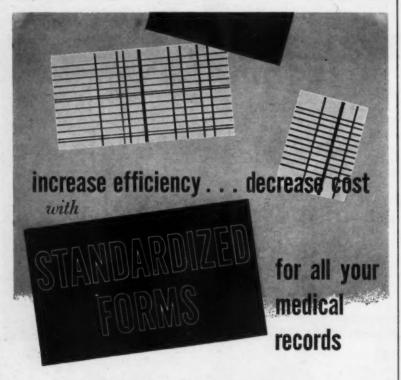
Doris E. Gibney is the new assistant executive secretary of the Registered Nurses' Association of Ontario taking over the duties of Laura Barr, who was appointed executive secretary in April.

Miss Gibney has had various experiences in the nursing field. She has been staff nurse, head nurse and instructor at the Soldiers' Memorial Hospital, Orillia, Ont., and the Toronto Psychiatric Hospital. Since 1956 she has been assistant director of nursing at the latter institution.

Miss Gibney has been active in R.N.A.O. affairs since her graduation. She has served on district and provincial committees and has acted as psychiatric consultant to the association's panel of examiners.

Dr. M. Martin to Serve on W.H.O. Committee

Dr. Morgan Martin, chief of the Mental Health Division of the Department of National Health and Welfare, has accepted an invitation to serve as a member of the World Health Organization's Expert Committee on mental health. The committee, which will meet in Switzerland, will consider the rôle of public health officers and general practitioners in mental health care. The coming session is the eleventh meeting of the committee, which is reconstituted on each occasion depending upon the subject under consideration.



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Dr. Martin's invitation to join the committee marks the third time a Canadian has been asked to serve on this Expert Committee of the W.H.O.

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- · Senior nutritionist with the Maternal and Child Division, New Brunswick Department of Health, Florence Swan, has been awarded a one-year fellowship for graduate study in the Institute of Nutrition Sciences, School of Public Health, Columbia University, New York City. Miss Swan entered the employ of the Department in 1945. She had previously been employed as home economics director and nutritionist with a national food company, and as a home economist with the federal department of agriculture.
- The Sanatorium Board of Manitoba welcomed a new member to its staff this summer when H. James Gordon Loewen assumed the position of accountant at Assiniboine Hospital, Brandon.
- Douglas Archer, formerly general office manager of Hamilton General Hospitals, Hamilton, Ont., is now chief accountant at the Scarborough General Hospital, Scarborough, Ont.
- Sydney Pedvis, M.D., has been named paediatrician-in-chief at the Jewish General Hospital, Montreal, Que., replacing Dr. Benjamin Benjamin, who has been appointed to the honorary consulting staff.
- A former graduate of the hospital administration course at the University of Toronto, Leon Bennet-Alder has assumed the position of administrator at the Winter Park Memorial Hospital, Winter Park, Florida, Prior to his new appointment, Mr. Bennet-Alder was administrator of the Chicago Osteopathic Hospital and business manager, Chicago College of Osteopathy.

Irregular Use of Drugs

To achieve positive results from the use of anti-tuberculosis drugs, they must be administered regularly. If treatment is irregular, the germ will build up a drug resistance and this new drug-resistant germ can be spread to others.

New drugs have made it possible to release most patients from hospital after a relatively short period of treatment. They feel so good after a few weeks that they neglect taking their medicine. A closer follow-up program for these cases might combat the problem.

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Medic-Alert Established in Canada

Countless Canadians with special medical problems, such as diabetes, epilepsy, special blood types, et cetera, have a fear of emergency or accident which may expose them to needless suffering, jailings and even death because of an error in treatments. The Canadian Medic-Alert Foundation, working closely with Medic-Alert in Turlock, California, has recently been established to deal with this problem in Canada through the provision of identification bracelets. The Canadian headquarters is at 176 St. George St., Toronto, Ont.

Membership in Medic-Alert is \$5



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and members receive a disc on a 24" chain, on the back of which is engraved the owner's serial number and the medical problem, e.g. allergic to horse serum, allergic to penicillin, diabetes, epilepsy, glaucoma, haemophilia, taking anticoagulants, multiple sclerosis, myasthenia gravis, neck breather, allergic to bee stings, wearing contact lenses, commercial deep sea diver and skin diver.

700 Disaster Kits for Hospitals in Ontario

Seven hundred emergency disaster kits will soon be supplied to the 47 hospitals designated as "disaster hospitals" in Ontario. The kits are being distributed on the basis of one to every 25 treatment beds in the hospitals. Each kit contains two stretchers, transfusion equipment, burn dressings and other common medical supplies to supplement normal hospital resources.

Many of them will go to hospitals in rural areas because they are not as adequately equipped to handle large-scale emergencies as urban hospitals. In the case of a

mass catastrophe, e.g. a nuclear exexplosion, medical supplies will be rushed to the city from a series of sub-regional depots set up outside the target area.

Federal plans call for the allocation of 2,800 kits in hospitals across the nation. To date three provinces - British Columbia, Manitoba, and now Ontario - have reached an agreement with the federal government for the distribution of these supplies. In addition to the emergency distaster kits, the federal government is going to provide the following: 420 advance treatment centres, each able to treat 500 patients in 36 hours before requiring re-supply; 200 mobile hospitals, each with 200 beds and each capable of being transported in four three-ton trucks in packages small enough to be carried by hand if necessary; 100 clinical laboratories; 20 public health laboratories; 26 blood depots; and central stocks to re-supply the various field facilities.

Children aren't happy with nothing to ignore,

And that's what parents were created for.

- Ogden Nash.



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Auxiliaries

(concluded from page 92) games, sales of doll clothes, homecooking and other items.

Montreal Hospital Has Busy Auxiliary

The Queen Elizabeth Hospital of Montreal, P.Q., recently received a cheque for \$9,163 from the women's auxiliary. The money will be used to purchase new equipment for the hospital, including special audiometric equipment valued at \$4,000, a \$2,000 operating microscope for use in eye and ear surgery, and a \$2,000 respirator to assist patients with impaired breathing.

Small Group Very Successful

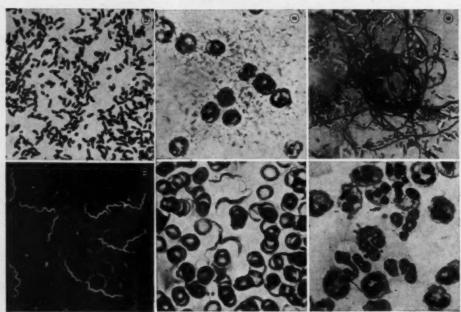
Although the members of the women's auxiliary to Lillian Fraser Memorial Hospital, Tatamagouche, N.S., are only 12 in number, they have done a tremendous amount of work over the past few years. Among the many items provided by them for the hospital are: sheets, cotton for bed screens, dishes, new

and re-upholstered chairs, a couch, television set and birth certificate forms.

- Over the past year Prince County Hospital Ladies' Aid, Summerside, P.E.I., raised more than \$2,000 for new equipment. One of the items purchased for the hospital is an electrically-controlled oxygen tent valued at \$650.
- The Penticton Senior Hospital Auxiliary, Penticton, B.C., makes a yearly donation to the hospital for equipment. The group's 1961 donation of \$278 purchased a dressing cart, an anaesthetic table and two preparation tables (all for the emergency department), and an electric spraying unit for disinfecting isolation rooms.
- The women's auxiliary to Grand Forks Community Hospital, Grand Forks, B.C., recently made their largest donation yet to the hospital \$522. This money will be used to buy a respirator for emergency

cases. It is expected to save lives which might otherwise be lost.

- A special bassinet known as a resuscitator was recently presented to Kitimat General Hospital, Kitimat, B.C., by the women's auxiliary. The machine is designed to provide suction, aspiration and resuscitation for newborn infants.
- Since the Bulkley Valley District Hospital in Smithers, B.C., opened in 1934, its women's auxiliary has raised a total of \$10,750. The members' current project is to raise \$2,000 for an electric dish washer for the hospital kitchen.
- A cheque for \$1,000 and three recommendations on how it might be spent were given recently to the Kirkland and District Hospital by the president of the women's auxiliary. The recommendations were: a television set for the chronic patient's ward, two new emergency oxygen units and photographic equipment for the laboratory.



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Dietary Service (continued from page 68)

staff have had little, if any, training in what we in the dietetic profession belive are essential aspects, e.g., planning the menus in advance (not, as so often we have been told during our visits to rural hospitals, "I do it in my head".) We want them to still use their heads but also to record the information on paper. Purchasing should be based on monthly or quarterly experience rather than the way it is now done—daily or weekly and from the local store. These principles indicate good organization.

As mentioned before, the Standards Division is charged with assisting educational programs already established in the hospital field and to recommend the establishment of institute programs if necessary. The Manitoba Hospital Services Plan prefers the former approach, that of working through existing organizations,

What Has Been Done

1. We have prepared a check list to assist in obtaining an over-all picture of the dietary set-up of each institution.

2. "Familiarization visits" have been made to all hospitals in rural Manitoba (of which there are over 80) viewing them as a whole and more specifically with regard to food service. Reports were prepared and then reviewed by Dr. Wood. In some cases letters were sent to hospitals where conditions were found to be at variance with existing legislation, e.g. the Public Health Act, Part IV, Division 7, "Eating Establishments" and Division I, "Food and Food Handling Establishments". Condensed reports of these visits were submitted to the members of the Manitoba Hospital Survey Board who are currently reviewing the hospital situation in Manitoba.

3. A diet manual has been written in response to requests from our rural hospitals for assistance with modified diets. An advisory committee, comprised of the Nutrition Committee of the Manitoba Medical Association and representatives from the Dietetic Association of Manitoba, assisted.

4. Each hospital was asked to submit, for review, copies of menus for three different weeks. Canada's Food Guide was used as a standard for comparison. Letters were written giving our comments and sent to the appropriate hospital. So far only four hospitals have

(continued on page 164)

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writes N. S. Lehto, Secretary-Treasurer, Plummer Memorial Public Hospital, Sault Ste. Marie, Ontario.

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"The National representative has always assisted on installation of these systems and on any problems regarding changes in systems.

"We are very happy to have this opportunity of expressing our satisfaction with our National Accounting Machines."



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337

Dietary Service (continued from page 162)

not availed themselves of this opportunity.

5. Because our terms of reference include the study, review and critique of plans proposed for construction and renovation programs, we have prepared a guide to aid us in reviewing dietary lay-outs. It is based on the proposed dietary standards which have been developed.

6. We have been building up an equipment reference file so that we can be kept up-to-date on information about equipment. Therefore, upon request, we can assist hospitals in the purchase of new equipment. When a hospital desires a piece of equipment costing over \$1,000, the requisition must be submitted to Manitoba Hospital Services Plan for approval. If it concerns the dietary department, the requisition is sent to our division. The hospital has done the initial investigation with regard to make, model and price. Before a decision can be made we may find it necessary to visit the hospital to discuss the situation and perhaps contact other equipment companies or refer to our equipment file.

For The Future

1. My assistant and I plan to make an over-all review of our individual hospital visit reports and cull from them vital information on (a) personnel policies, e.g. hours of work, type of shifts, cooks' salaries; (b) the physical set-up, kitchen lay-out, space and equipment; (c) method of food preparation and service, and so forth. This information will be invaluable to us, for when the standards for licensure become law, we shall readily know which hospitals in what areas will need most assistance. This is how we, as consultants, can play our part to improve patient care throughout our province.

2. As a follow-up of our familiarization visits to hospitals in Manitoba, we hope to prepare a communique to assist in maintaining and strengthening our association with hospital personnel. Each consultant will contribute to it. We believe that this is an excellent method by which all hospitals may be contacted simultaneously with

educational information from the Manitoba Hospital Services Plan.

 Members of our division will concentrate first on visits to the large Winnipeg hospitals.

4. We plan to assist in an educational program for hospital dietary personnel.

5. We hope to participate in a raw food cost study to find out whether the amount allowed by the plan is satisfactory.

6. In 1959, the Canadian Dietetic Association set up a committee on hospital standards for dietary departments. At the 1960 midyear board meeting, the committee reported and the directors agreed that such information was being provided at provincial level, However, at the 1960 June board meeting held in connection with the 25th annual convention in Montreal, a brief from the Saskatchewan Dietetic Association was presented which reopened the topic. The brief asked the C.D.A. to establish Canadian standards for dietary departments and to define nutritional standards, equipment, number of dietary personnel, function of the dietary department and

(concluded on page 166)

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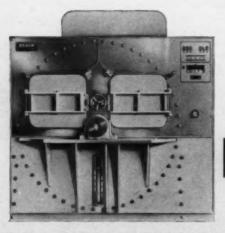
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interdepartmental relationships, for various sizes of hospitals. A steering committee was appointed to direct the policies of the Hospital Dietary Department Standards Project. The Association will be giving valuable leadership in establishing standards which will be of assistance to provinces as each develops its own hospital standards.

To quote from an address given this fall to the Manitoba Medical Association by the Hon. George Johnson:

"What I am trying to say is that in the field of health and public welfare, probably more than anywhere else, people want their needs met. By and large, they are willing to pay for good service if it meets the need. I know we all accept the fact that when a patient gets really sick, he expects decent accommodations and a high standard of care. Government today must give leadership, developing policies which do meet these needs in a practical and economical manner, and the policies must be so designed as to stimulate participation by all elements of society."

The Junior League Cerebral Palsy Training School and Clinic, Toronto, Ont., has instituted a new service known as the "Eileen McEachern Cerebral Palsy Information Centre" which is now available to parents of children with cerebral palsy. This service has been instituted through the generous bequest of Mrs. Eileen McEachern.

The staff of the Centre consists of a nursery school and child development specialist, physiotherapists, and a medical social worker and is open once a week at the Junior League Clinic.

The Centre will provide such services as further information about the condition itself, advice in regard to the general care of the child; advice about a general program for the child, with information as to procedures which may be considered preliminary to therapy programs; counselling in regard to the emotional problems created in the parents and family by the handicapped child; and case-work assistance

to parents, both individually and in small groups.

The program is primarily educational. It does not provide an active treatment program for the child and the general medical care of the child is left to the family physician. The Centre is particularly desirous of being able to provide these services to parents shortly after the diagnosis of cerebral palsy has been made.

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Too many people who are nice people at heart become another sort when they pick up a pen or a dictaphone. They tighten up. They become unnatural. They curdle into impersonality and choose starchy sentences. Their product is like a page printed with very old and worn-out type. In the vivid prose which marked some seventeenth century writers, James Howell writes: "Their letters may be said to be like bodies without sinews, they have neither art nor arteries in them."



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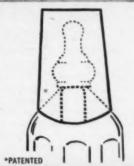
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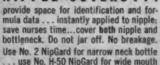
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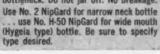


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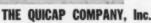
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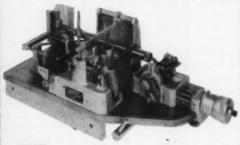






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Twenty Years Ago

From Canadian Hospital October, 1941

A Plan That Failed

When Dr F. A. Washburn of Boston received the annual A.H.A. Award of Merit in Atlantic City in recognition of his long career of service to the hospital field, he acknowledged in his humorous reply that he suffered from the lack of an ability highly desirable in an administrator, namely, the ability to remember names.

For example at his Cape Cod summer home he had a fine juniper tree, but could never remember what to call it. One autumn he had an inspiration: January, February, March, April, May, June-Juniper! Next spring when he went back to Cape Cod and spied this tree he could not understand why the magic formula did not work, despite the fact that he conscientiously repeated Sunday, Monday, Tuesday-et cetera.

Indian Ambulance in London Has Proud Record

An Indian ambulance unit in London holds a most distinguished record—for it calls answered and more (politely) attended more "incidents" than any other unit in its large district. During a particularly heavy raid they were bombed out of their station, but carried on from a public tele-phone booth, which they made a headquarters for incoming calls. According to T. A. Rama, an Indian journalist in London, the unit prefers that its claim to fame shall be that they make the best curry found outside of India.

The Man Without a Home

One of the disadvantages of being at home in every state and province is that there are times when such a cosmopolitan individual hardly knows which is his home. The House of Delegates of the American Hospital Association draws together the leaders in hospital work from the whole continent; yet it looked for a while as if its very democratic nature would exclude that most essential of leaders, Dr. M. T. MacEachern. Facetiously he often gives his address as "Pullman Car, North America". However, as "Pullman Car" is not entitled to a representative, he has, for the last two years, proudly answered to the call for the delegate from Delaware! This year he was found to have changed his residence to Wyoming. The main thing is to have him there.

More Truth Than Fiction

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Dr. F. W. Jackson, Deputy Minister of Health for Manitoba and a strong advocate of better maternity care, tells this story:

Not long ago while the train was stopped at a rural station he stepped over to the fence where a farmer was watching a brood mare and her foal. Having exchanged the usual pleasantries, Dr. Jackson enquired, "How long did you rest up the mare before she was due?"

"Oh, the vet said I should stop working her at least a month before; and I did, too."

"How long are you letting her rest now that the foal is born?"

"Well, the vet thought she should have a month or six weeks out of harness."

Seeing a group of small children about the farmhouse, Dr. Jackson then enquired, "Say, when your wife was having her babies, how much time off did she have then, and before and afterwards?"

"Why, the doc didn't say anything about that. She just sorta kept on going as best she could."

The Lame and the Halt

During the torrid weather at the end of July a leading eastern daily came out with an eight-column header, "Four Hurt and Forty Injured when Dance Hall Roof Crashes at Sarnia Dance Hall". Perhaps we are slipping in our appreciation of these fine distinctions. Recently we noted that a motor car victim had had his thighbone broken and his arm fractured. All of which led the Weather Man, who takes time off from charting Atlantic weather for trans-ocean pilots to collect old Canadiana and to whom we narrated this observation at lunch, to recall an old Grand Trunk time table in his possession. published at Kettleby, Ont., which distinguishes between "Trains distinguishes between going north" and "Trains moving south" (the italics are ours),

It is a literary vice not to seek out the reader's interest. You may tell him what you want in impeccable language and forceful manner, but you fall short of success unless you pay attention to what he wants or can be made to desire. Your ideas must enter, influence and stick in the mind of the recipient.



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Visitor Education Program

The Public Relations Committee of the Ontario Hospital Association has launched an immediate and extensive public education campaign in the "do's and don'ts" of hospital visiting. At the present time one of the most persistent and widespread problems faced by hospitals is the need for better public understanding of visiting etiquette in hospitals.

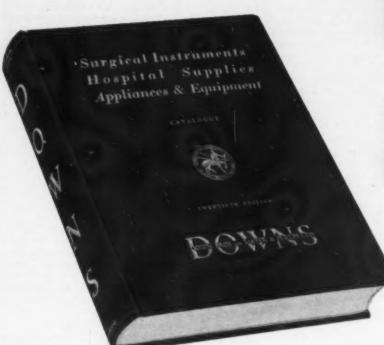
As a first step in the campaign the Association has produced a series of cartoon posters specially designed to point out four of the major visiting "crimes". Sets of these posters have been distributed to administrators to be displayed in prominent positions. Newspapers throughout the province have also received the posters, together with an explanatory news release.

Mouthpainting Helps Patients

At the University Hospital in Edmonton, Alta., two polio patients are pioneering a new form of therapy—mouthpainting, which consists of wielding a paintbrush held in their teeth.

Donna Graham, a polio victim since 1953, has been so successful as an artist that some of her paintings are touring the United States. Using a reading stand as an easel, she paints from her bed. The second patient, Johnny Lagoyda, has now reached the stage where he is considering outdoor sketching in a wheelchair.

Both artists claim that painting relieves the monotony of doing nothing, and the effort of moving the neck while using the brush has strengthened muscles and helped breathing.



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Books Received

(continued from page 98)

This contribution will add to the growing body of knowledge that is rapidly accumulating about this valuable patient service which has been accepted as an essential phase of progressive patient care.

BASIC PHARMACOLOGY FOR NURSES, Second Edition. By Jessie E. Squire, B.A., R.N., M.Ed. Pub-lished by the C. V. Mosby Co., St. Louis, Mo, 1961. Illus. Pp. 274. Price In this booklet the theory and

concerning medicine drugs have been correlated step by step with practice in drug administration, and the entire text is organized to encourage the nurse in self-help study and testing.

The book is designed to help students in brief courses in nursing to understand their responsibility in the administration of medicine and to appreciate the necessary limitations imposed on nurses in this function. It includes basic information concerning the main effects, uses, and doses of the com-

mon drugs, together with weights, measurements, abbreviations commonly used in medicine, directions for the use of tuberculin, insulin, and other syringes; and provision for practice in correct methods of administration of medicines. Both students and instructors will find it a useful source of basic informa-

NURSING IN TUBERCULOSIS. URSING IN TUBERCULOSIS.
Second Edition. By Louise Lincoln
Cady, R.N., B.S., M.A. Published by
the W. B. Saunders Co., Philadelphia, 1961. Canadian agents McAinsh & Co. Ltd., Toronto, Ont.
Illus. Pp. 489. Price \$6.50.
Tuberculosis has not been con-

quered, and in many countries of the world it continues to be a major health problem. It is also a family problem because many patients are discharged from hospitals early and take drug therapy at home. The nurse must be able to meet the total interrelated physical and psychological needs of both patients and their families.

This book is written to bring up to date the knowledge of those nurses with past experience in tuberculosis nursing. It also supplies the information needed by those who are new to the field in order that they may adequately care for tuberculosis patients in the home or in the special or general hospital.

REPORT OF THE SECOND INSTI-TUTE ON CLINICAL TEACHING. Edited by Helen Hofer Gee and Charles G. Child, III. Published by the Association of American Med-ical Colleges, Evanston, Ill., 1961. Illus. Pp. 199.

This is the report of the Seventh Teaching Institute of the Association of American Medical Colleges held in Chicago, Ill., 1959. It is one of a series of conferences on the teaching of medicine.

The four main topics discussed are medical school curricula; the rôles of the university and examining boards in the education of medical students, interns and residents; science and art in teaching responsibility for patients; and a symposium on professional educa-

PERSONAL AND VOCATIONAL RELATIONSHIPS FOR PRACTICAL NURSES by Christine H. Bush, R.N. Published by W. B. Saunders Co., Philadelphia, 1961. Canadian agents McAinsh & Co. Ltd., Toronto, Ont. Pp. 107. Price \$1.50.

Since the curriculum in practical nursing schools has made rapid advances within the past several years, there has been a great need for reference material and text-



INGIRAMI& BIEILIL

books. The author compiled this book from notes and lectures she had given in the past. It will be helpful not only for practical nursing students but also to those licensed practical nurses who have had many years of valuable experience but have not had the theoretical training which graduates of practical nursing schools have received. They will find it useful for furthering their knowledge and broadening their nurse-patient and nurse-personnel relationship.

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PLANNING THE SURGICAL SUITE by Warwick Smith. Published by F. W. Dodge Corporation, New York, 1960. Illus. Pp. 471. Price \$12.75. This guide explains how the in-

This guide explains how the intended functions of a surgical suite affect its organization and design, and describes the methods of translating these into actual facilities. With the aid of checklists and guide tables, it provides for a complete analysis of the function and design of the operating room complex.

Architects and designers will find this book valuable as a basis for examining the adequacy of present traffic patterns and use-cycles. Medical and administrative personnel will find it helpful in understanding the effects of the functions and organization of the suite upon the physical design.

PRACTICAL NURSE NUTRITION EDUCATION by Alberta Dent Shackelton, B.S., M.S., M.Ed. Published by W. B. Saunders Co., Philadelphia, 1960. Canadian agents McAinsh & Co. Ltd., Toronto, Ont. Illus. Pp. 199. Price \$3.

This booklet provides a complete study guide for practical nurses in all nutrition phases of nursing care. It covers the following areas: personal, patient and family nutrition; nutrition and disease; public health and community nutrition; and principles of food preparation.

HEALTH ORGANIZATIONS OF THE UNITED STATES AND CANADA: NATIONAL, STATE AND REGIONAL. Published by the Graduate School of Business and Public Administration, Cornell University, Ithaca, N.Y., 1961. Pp. 196. Price \$10.

This is a directory of voluntary associations, professional societies and other groups concerned with health, medical, hospital, pharmaceutical and related fields. CALDERWOOD'S ORTHOPEDIC NURSING, Fifth Edition, by Carroll B. Larson, M.D., F.A.C.S., and Marjorie Gould, R.N., B.S., M.S. Published by C. V. Mosby Co., St. Louis, Mo., 1961. Illus. Pp. 547. Price \$6.50.

This text-book attempts to bring together in one volume the background of medical information and nursing techniques necessary to assist the nurse in caring for the orthopedic patient. In this edition much new content has been added, such as cerebral palsy, metabolic disorders of the bone and a chapter on medico-legal responsibilities of nurses.

This is a book which will be valuable to students as well as instructors in nursing.

THE CATARRHAL CHILD, by John Fry, M.D., F.R.C.S. Published by Butterworth & Co. (Canada) Ltd., Toronto, 1961. Illus. Pp. 139. Price \$5.

This book on the child with recurrent respiratory infections is based on the observations, records and clinical conclusions of a family doctor in general practice in a particular area of England. Over a ten-year period and followup of 750 children, the author



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284 KING STREET WEST, DEPT. CH. TORONTO 28 • ČANADA studied the causes, natural history and the many and various problems of the catarrhal child. In addition the book illustrates the possibilities of general practice as a fruitful field of research.

It should prove helpful to the intelligent parent as well as to medical people investigating common respiratory illnesses among children.

MOSBY'S REVIEW OF PRACTICAL NURSING, Third Edition. Published by C. V. Mosby Co., St. Louis, Mo., 1961. Illus. Pp. 344. Price \$4.25. This book may be used as a workbook during the course in practical nursing, or for review by both students and graduates. This edition has been revised in the light of the changes in education and functions of the practical nurse who is today expected to perform duties which used to be the prerogative of the professional nurse.

The text covers such topics as basic science, drugs and administration of medications, nutrition and diet therapy, rehabilitation nursing, communicable diseases, nursing the aged and the mentally ill, maternal and child care and home care. At the end of each unit there is a section devoted to review questions in the material discussed. Accompanying the book is a pamphlet containing answers to these questions.

THE DAY HOSPITAL MOVEMENT IN GREAT BRITAIN, by James Farndale, B.Com., F.H.A., M.R.S.H. Published by Pergamon Press, London, 1961. Illus. Pp. 430.

This is an analysis and description of 65 of Great Britain's day hospitals and day centres with special reference to psychiatric and geriatric hospitals.

The day hospitals are examined mainly from administrative, economic and social aspects. Subjects studied include the cost of day treatment in relation to that of in-patient treatment, the question of whether any saving might result to the National Health Service by treating more patients by the day, the effect of day hospital provision on the demand for in-patient beds, and whether day hospitals are relieving, or would relieve, the overcrowding in some hospitals.

The author does not focus on clinical aspects, and such clinical information and views as are included have been supplied by doctors.

INTRA-ABDOMINAL CRISES, by Kenneth D. Keele, M.D., F.R.C.P., and Norman M. Matheson, F.R.C.S., M.R.C.P., F.A.C.S. Published by Butterworth & Co. (Canada) Ltd., Toronto, 1961. Illus. Pp. 397. Price \$10.

This book studies the problem of intra-abdominal crises, i.e. acute cases of abdominal pain and vomiting. The authors discuss abdominal emergency, indicate the lines of early management and stress the importance of diagnostic exclusion. The need for a medical-surgical synthesis is emphasized, i.e. a reclassification of abdominal crises as being both medical and surgical problems, rather than exclusively one or the other. The book will be of use to those doctors in general practice, or in hospitals, who perform the vast bulk of general medi-

An M.D. was teaching his wife to drive. When the brakes suddenly failed on a steep downhill grade, she yelled: "I can't stop. What shall I do?" "Brace yourself," advised the M.D. "and try to hit something cheap."

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Grants for Heart Research

The Life Insurance Medical Research Fund will give \$1,189,000 for heart research in the coming year. A total of 40 institutions and 18 individuals will share in the grants, and research will be carried on in the United States, Canada, England, Sweden and Germany.

The Canadian institutions to benefit are:

Hôtel-Dieu de Montréal, Montreal, Que., which will receive \$17,600 for research by Dr. Jacques Genest on the mechanism and treatment of hypertension;

School of Medicine, Laval University, Quebec City, Que., which will receive \$17,600 for research by Dr. Jacques LeBlanc on endogenous lipid-clearing substances, hypercholesterolemia and atherosclerosis;

Faculty of Medicine, McGill University, Montreal, Que., which will receive \$19,800 for research by Dr. Samuel Solomon on the rates of secretion of aldosterone, hydrocortisone and corticosterone in humans;

Queen's University, Kingston, Ont., which will receive \$16,500 for research by Dr. Pashupati P. Vishwakarma on relations between renal metabolism and excretion of di- and poly-carboxylic acids;

Faculty of Medicine, University of Alberta, Edmonton, Alta., which will receive \$16,500 for research by Dr. Cyril M. Kay on physicochemical properties of muscle proteins.

Faculty of Medicine, University of Manitoba, Winnipeg, Man., which will receive \$34,650 for research by Dr. Mark Nickerson on mechanism of action and applications of adrenergic drugs; and

University of Western Ontario, London, Ont., which will receive two grants—\$19,800 for research by Dr. Alan C. Burton on the biophysics of blood flow, and \$7,700 for research by Dr. K. Carroll on the relation of fatty acids to sterol synthesis of cholesterol.

The Canadian individuals receiving fellowships varying from \$4,500 to \$7,500 are:

John A. Downey, M.D., Nekomis, Sask., for study with Prof. Sir George Pickering at the University of Oxford, England;

Ladislas Gyenes, Ph. D., Montreal, Que., for study with Dr. Alec Sehon at McGill University, Montreal:

Bernard J. Leboeuf, M.D., Montreal, Que., for study with Dr. A. Baird Hastings at Scripps Clinic and Research Foundation, La Jolla, Calif.;

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Alexander M. Saunders, M.D., Vancouver, B.C., for study with Dr. Albert Dorfman at La Rabida-University of Chicago Institute, Chicago, Ill.; and

E. Reno Tustanoff, Ph.D., Windsor, Ont., for study with Dr. W. Bartley, at the University of Oxford, England.

C.N.A. Institutes School Improvement Program

An interim report on the school improvement program initiated last March by the Canadian Nurses' Association was given recently in Toronto by the director of the program, Glenna Rowsell. This program is one of three studies being undertaken by the C.N.A. through provincial nursing organizations in connection with a pilot project for evaluation of schools of nursing in Canada. Miss Rowsell reported that a number of 32-page questionnaires on such matters as the philosophy and objectives of the school, queries about organization, administration, faculty, students, curriculum and physical facilities have been sent to those schools participating in the program. In addition, two-day regional conferences are being held during the fall across the country, and at these an interpretation of the C.N.A. school improvement program will be given to hospital nursing staffs.

Advice Service Helps New Mothers

In addition to its teaching program for new mothers, the Royal Victoria Hospital in Montreal, Que., has had an advice service in operation since 1956. Often the mother with her first baby is faced with unexpected problems after she leaves the hospital. She may have the feeling of being "stranded with this small bundle of noise". It may be that she did not ask pertinent questions when she was in the hospital. In any case, she can ring the Mothers' Advice Service, discuss her problem with a professional person, and perhaps receive a boost of confidence in her own ability to care for her infant.

Few Cheers

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\$3.75 per column inch of fraction thereof, minimum charge \$3.75. Display advertisements, set in a box, may be requested on advertisements of 8 inches or larger at no additional charge, 34 page display advertisement—\$35.00. Advertisements must be received by the first of the month to appear in that month's issue.

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Excellent employee benefits, pension plan, etc. Salary open.
Apply to:

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For active general hospital (50 beds) with full complement of services: Building completed February 1961: Operating Room Supervision experience essential,

Salary commensurate with qualifications and experience.

Apply, giving full particulars of training, etc.:

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THE ST. CATHARINES GENERAL HOSPITAL

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REGISTERED MEDICAL RECORDS LIBRARIAN WANTED

to assume the responsibility of the records department in a 163-bed general hospital. For further particulars, please reply

Administrator, Kirkland and District Hospital, Kirkland Lake, Ontario.

ADMINISTRATIVE ASSISTANT

Sister hospital requires administrative assistant to work directly with administrator in the formulation and revision of certain hospital policies and procedures, Should be capable of assuming complete responsibility for various administrative functions. Hospital experience essential. This is a temporary position for a minimum of two years. Excellent opportunity to gain valuable practical experience in the administration of a medium size hospital. Reply, stating qualifications, availability and salary expected, to

Box 10355, Canadian Hospital, 25 Imperial St., Toronto 7, Ontario.

Chartered Physiotherapist

New 225-bed General Hospital to open December 1, 1961 requires second Chartered Physiotherapist immediately. Active treatment hospital working primarily with orthopedic and surgical cases.

Both in-and-out patients treated.
Good personnel policies in effect, 40 hour, 5 day week, sick benefits. Group Insurance and Pension Plan.

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Brandon General Hospital

Brandon General Hospital, Box 280, Brandon, Manitoba, Canada

Assistant Dietitian

for 100 bed hospital, expanding to 165 beds, situated on the shores of Lake Erie. Successful applicant will be responsible for special diets and will be expected to train for the charge dietitian's post in future.

Salary and personnel policies attractive.

Apply to: The Administrator, Port Colborne General Hospital, Port Colborne, Ontario.

MEDICAL RECORDS LIBRARIAN

for modern 300 bed hospital in Southern Ontario. Salary commensurate with ability and experience. Send resume including experience, date available and salary desired to:

G. I. Glover,
Assistant to the Administrator,
PUBLIC GENERAL HOSPITAL,
Chatham, Ontario.

POSITIONS AVAILABLE

Pharmacist
Physiotherapist
Executive Housekeeper
Medical Records Librarian

These are senior positions in well equipped departments and attract excellent salaries and conditions of service.

Apply to Administrator, The Parry Sound General Hospital,

Parry Sound General Hospita Parry Sound, Ontario.

CHIEF DIETITIAN

Applications are invited from Registered, experienced Dictitions with membership in the Canadian Dictetic Association, for appointment to the post of Chief Dictition at the 3t. Thomas Elgin General Hospital, a modern accredited General Hospital, a modern accredited General Hospital of 382 beds, We offer a 40 hour week, 8 statutory holidays, four weeks vacation with pay per annum. Excellent Sick Benefits and Pension Plan. Salary will be set in accordance with qualifications and experience. Apply to: Superintendent, St. Thomas Elgin General Hospital, St. Thomas, Ontario.

POSITION WANTED

Administrator - Business Manager.
Experienced, middle - aged. 1961
H.O.M. graduate, conscientious,
desires change. Apply: Box No. 913
M, Canadian Hospital, 25 Imperial
St., Terente 7, Ontarie.

DIETITIANS REQUIRED

Director of Dietetics and Qualified Dietitians for 450-bed accredited hospital. Large Student School. New and modern Dietary Department, cafeteria and trayveyor service. Salary commensurate in accordance with C.D.A. recommendation. Day shifts only. Liberal holidays, sick leave, pension plan and other perquisites. Excellent working conditions and quarters prevail. Transportation refundable after six months.

Apply Superintendent, McKellar General Hospital, Fort William, Ontario.

NURSING CONSULTANT (EDUCATIONAL ASSISTANT) \$6540 - \$7500

required by Emergency Health Services Division Department of National Health and Welfare OTTAWA

The principal responsibilities of this position will be to analyse the requirements for professional and lay education to meet nursing needs in disaster; to develop and maintain educational programmes; and to interpret and advise on those aspects of nursing education which relate to the Emergency Health Services Programme.

Candidates must possess a Baccalaureate Degree in Nursing; registration in a province of Canada and at least five years of experience in conducting and supervising a nursing education programme in a university or an approved hospital school of nursing.

For further details and application forms write to

CIVIL SERVICE COMMISSION, OTTAWA

Please ask for Information Circular 61-785.

B.C. Hospital to Build \$3 Million Wing

The Royal Jubilee Hospital in Victoria, B.C., recently received the approval of the provincial government to call for tenders for the construction of a new wing. The estimated cost is approximately \$3 million, of which the provincial government will pay one-half of the approved total costs, plus one-third of the approved costs of equipment and furnishings.

The plans call for an L-shaped, five-storey building, which will include the following: a modern seven-room radiological suite; a large radio-therapy department with cobalt bomb; and ten operating rooms on the top floor. Three floors will provide 195 beds. The architects are Townley and Matheson of Vancouver.

Quebec Hospital Changes Name and Status

The Laurentide Hospital, owned and operated by Consolidated Paper Corporation Ltd. for many years in Grand'Mère, Que., has now undergone a change of name and status. By virtue of an Order-in-Council passed by the Quebec provincial government recently, and in view of the type of work carried out in the hospital, it obtained recognition from the Department of Health as a public institution. It then applied for and obtained a charter, but since there was already an "Hôpital des Laurentides" in the province, it was decided, to avoid confusion, that the institution's name should become Grand' Mère General Hospital.

Progress Payments to B.C. Hospitals

During the early summer the provincial government of British Columbia authorized the payment of progress cheques totalling \$186,519 for six B.C. hospitals, as part of their 50 per cent grant-in-aid of approved major construction. The payments bring the amount paid to these hospitals by the government to over \$1,800,000 of an estimated \$4,500,000 in grants-in-aid committed for the projects.

Following are the six hospitals involved in the program; War Memorial Hospital at Williams Lake; Nanaimo Regional Hospital, Nanaimo; Royal Columbian Hospital, New Westminster; Terrace and District Hospital, Terrace; St. Joseph's General Hospital, Dawson Creek; and Chemainus General Hospital, Chemainus.

Blessed are the forgetful: for they get the better even of their blunders—Nietzsche

OUR ADVERTISERS

by Page Numbers

Acrow (Canada) Limited	18
Air-Shields (Canada) Ltd.	153
Aloe A. S. Company	167
Almedic Company	174
Amtice Floering Div.	
American Biltrite Rubber Company (Canada) Ltd	121
	14
American Cystoscope Makers, Inc.	
American Sterilizer Company of Canada Limited	85
Ayers Limited	154
Bard Inc., C. R.	67
Bard-Parker Company, Inc.	146
Barnstead Still & Sterilizer Co.	169
Bassick Division	137
Bauer & Black Div. Kendall Co. Canada Ltd	11
Baxter Laboratories, Inc.	4
Been Matel Consister Inc.	170
Beam Metal Specialties, Inc.	168
Beardmore & Company Limited	
Becten, Dickinson & Co. Canada Ltd.	33
P. Beiersdorf & Company	37
Booth, W. E. Company Limited	15
Borden Company Limited	103
Braun, G. A. Inc.	164
British Oxygen Canada Limited	125
Burroughs Business Machines Ltd.	
solvegus sesiness machines sia,	
Canadian Fairbanks-Morse Co. Ltd.	10
Condition Plans Control No. 110.	
Canadian Floor Service Limited	
Canadian Laboratory Supplies Ltd.	117
Canadian Laundry Machinery Co. Ltd II	
Canadian Liquid Air Co. Ltd.	73
W. Carsen & Co. Ltd.	13
Carveth, Walter A. Limited	40
Casgrain & Charbenneau Ltd.	65
Castle Company	65
Celotex Corporation	41
Clay-Adams Company Inc.	29
Cook Machinery Co. Inc.	113
Colson (Canada) Ltd.	142
Corbett-Cowley Limited	173
Cutter Laboratories	
Cyanamid of Canada Limited	
	100
Dalex Limited	
Davel Rubber Company	39
Davol Rubber Company Deknatel, J. A. & Son Inc.	39 131
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd.	39 131 41
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd.	39 131 41 171
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd.	39 131 41 171
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd.	39 131 41 171
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd.	39 131 41 171
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada	39 131 41 171 11-27
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited	39 131 41 171 1-27 83 165
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada	39 131 41 171 1-27 83 165
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc.	39 131 41 171 1-27 83 165 152
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominien Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe	39 131 41 171 11-27 83 165 152
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd.	39 131 41 171 11-27 83 165 152 71
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominien Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe	39 131 41 171 11-27 83 165 152 71
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company	39 131 41 171 21-27 83 165 152 71 149 111
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominien Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc.	39 131 41 171 11-27 83 165 152 71 149 111
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaten's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxe-Allenburys (Canada) Ltd.	39 131 41 171 11-27 83 165 152 71 149 111
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominien Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc.	39 131 41 171 11-27 83 165 152 71 149 111
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp.	39 131 41 171 11-27 83 165 152 71 149 111
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp.	39 131 41 171 11-27 83 165 152 71 149 111
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gomco Surgical Mfg. Corp.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxe-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited	39 131 41 171 171-27 83 165 152 71 149 111 166 129 91
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxe-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardle, G. A. Company Limited J. F. Hartz Company Limited	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Honeywell Controls Limited	39 131 1171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17
Davel Rubber Company Deknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxe-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited J. F. Hartz Limited Honeywell Controls Limited Honeywell Controls Limited Hospital & Medical Records Co.	39 131 41 171 21-27 83 165 152 71 149 111 166 129 91 175 77 19-20 6-17 162
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Honeywell Controls Limited	39 131 41 171 21-27 83 165 152 71 149 111 166 129 91 175 77 19-20 6-17 162
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxo-Alienburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Compony Limited J. F. Hartz Compony Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd.	39 131 41 171 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemeo Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 77 77 162 107
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxe-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. liford Limited Ille Electric Corporation Imperial Surgical Surgical Co. Limited Ille Electric Corporation Imperial Surgical Surgical Co. Limited	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 79-20 6-17 162 107
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 77 162 107 15 148 119 119
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frost, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107 118 119 137 172
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominien Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107 118 119 137 172
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gomeo Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. liford Limited lile Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. International Business Machines Company Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 16-17 162 107
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gomeo Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. liford Limited lile Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. International Business Machines Company Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 16-17 162 107
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frost, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 16-17 162 107 15 148 119 117 23 38
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Georpres Wringer, Inc. Georpres Wringer, Inc. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Honeywell Controls Limited Honeywell Controls Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. International Business Machines Company Lid. Jewett Refrigerator Co. Inc.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107 119 137 148 119 137 148 119 137 148 148 148 148 148 149 149 149 149 149 149 149 149 149 149
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosts, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingrams & Bell Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107 119 137 148 119 137 148 119 137 148 148 148 148 148 149 149 149 149 149 149 149 149 149 149
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosts, Charles E. & Company Georpres Wringer, Inc. Glaxo-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. Iliford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram, G. A. Co. (Canada) Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingrams & Bell Ltd.	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107 119 137 148 119 137 148 119 137 148 148 148 148 148 149 149 149 149 149 149 149 149 149 149
Davel Rubber Company Daknatel, J. A. & Son Inc. Dominion Sound Equipments Ltd. Down Brothers & Meyer & Phelps Ltd. Dustbane Mfg. Company Ltd. Eaton's of Canada Edwards of Canada Limited Everest & Jennings, Inc. Fisher & Burpe Fisher Scientific Ltd. Frosst, Charles E. & Company Geerpres Wringer, Inc. Glaxe-Allenburys (Canada) Ltd. Gemco Surgical Mfg. Corp. Hardie, G. A. Company Limited J. F. Hartz Company Limited J. F. Hartz Company Limited Hospital & Medical Records Co. Huntington Laboratories Ltd. liford Limited Ille Electric Corporation Imperial Surgical Co. Limited Ingram G. A. Co. (Canada) Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Bell Ltd. Ingram & Refrigerator Co. Inc. Johns, O. H. Glass Company Johnson Controls Limited	39 131 41 171 11-27 83 165 152 71 149 111 166 129 91 175 77 9-20 6-17 162 107 15 148 119 137 172 38 151

October, 1961

Lac-Mac Limited	141
Lakeside Laboratories (Canada) Ltd.	161
Lalende, Frank P. Limited	162
Legion Utensils Co. Inc,	32
	173
Linde Gases Div. Union Carbide Canada Ltd.	42
Lily Cups Limited	79
Lord & Burnham Company Ltd.	122
Lord & Bernnam Company Ltd,	122
MacEachern, Gordon A. Ltd.	36
Manlove Alliott & Co. Ltd.	35
McKague Chemical Company	157
Mercer Glass Works Inc.	36
Metro Medical Distributors Inc.	95
Mil-ke Products Limited	112
Milner Edward Co. Ltd.	81
Minnesota Mining & Mfg. of Canada Limited	143
minnesora mining & mrg. or Canada Limited	143
National Cash Register Company of Canada Ltd	163
Nichols, R. H. Limited	167
	99
Ohio Chemical Canada Ltd.	
Onan Division Studebaker Packard Corp.	145
Pal Blade Corporation Limited	115
Parke, Davis & Company Ltd.	6-8
Party Riese Company Ltd.	154
Perry-Briggs Company	101
Pharmaseal Laboratories, Inc.	
Physicians' Record Company	156
Picker X-Ray Engineering Ltd.	3
Pioneer Rubber Company	127
Powers Regulator Co. of Canada Ltd.	28
Professional Tape Company	69
Quicap Company Inc.	167
Recordak of Canada Limited	109
Ross Disposable Hospital Products	150
Rusch of Canada Limited	95
Sklar, J. Manufacturing Company	123
Smith & Nephew Limited	159
Sterne Equipment Company Limited	122
Sterling Rubber Company Limited	
Stevens Companies 65, Stewart-Warner Corp. of Canada Limited	137
Texpack Ltd	over
Texpack Ltd	
(Canada) Ltd,	87
Union Carbide Canada Limited	42
United-Carr Fastener Company of Canada Limited	-
	112
Valley City Mfg. Co.	105
Vollrath Company	172
Wabasso Cotton Company Ltd.	147
Wells Television of Canada Ltd.	94
West Chemical Products Ltd.	34
Wichita Precision Tool Co.	139
White Mop Wringer Company of Canada Ltd.	97
Wild of Canada Limited	160
Wilson, J. A. Lighting & Display Ltd.	100
Wilson Science Equipment Ltd.	135
G. H. Wood & Company Ltd 7	5-76
X-Ray & Radium Limited	89

PROFESSIONAL DIRECTORY

Adamson, G. S. & Associates	176
Agnew, Herbert	176
Agnew, Peckham and Associates	174
Angus, H. H. & Assoc, Limited	177
Craig Madill Abram & Ingleson	176
Craig & Zeidler	176
Drever & Smith	176
Fairn, Leslie R. & Assoc.	176
Fleming & Smith	176
Govan, Ferguson, Lindsay, Kaminker, Langley & Keenleyside	176
Green, Blankstein, Russell Assoc,	177
Libling, Michener & Assoc.	177
Marani, Morris & Allan	177
MacLean, Clare G	176
Parkin, J. B. & Associates	177
Smith, Carter, Searle Associates	177
Somerville McMurrich & Oxley	177
Woods, Chester C.	177